

# IRIS Policy Manual: Work Instructions

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Department of Health Services Division of Long Term Care P-00708A (09/2014)

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# **Chapter 2: Eligibility**

# 2.2B.1 Medicaid Cost Share Payments

#### **Business Rules**

- 1. Medicaid financial eligibility is one of the requirements that must be met to be considered eligible for IRIS.
- 2. Cost share is the amount of a participant's income which must be paid, each month, to maintain Medicaid financial eligibility.
- 3. An Income Maintenance worker calculates the cost share amount as part of initial and ongoing Medicaid financial eligibility.
- 4. Medicaid rules require participants to report financial status changes to the County Income Maintenance Unit within ten (10) calendar days. Changes in a person's financial status may result in a new monthly cost share amount.
- 5. Participants who fail to pay cost share may be disenrolled from the program.
- 6. Cost share payment is not required for any month when the participant is in a hospital or nursing home.
- 7. Participants financially eligible for Medicaid as a Group A participant (those receiving Supplemental Security Income and those who have other Group A related Medicaid eligibility) do not have a cost share assessed.
- 8. Participants who fail to pay the required cost share may negotiate a repayment plan. Repayment plans must cure the default within 12 months.
- 9. People who fail to honor the established repayment plan are referred for disenrollment.
- 10. People who fail to arrange a repayment plan when arrears reach 90 days are referred for disenrollment.
- 11. When the participant's income changes so that the cost share becomes \$0, the participant is still expected to pay any amount in arrears and all business rules listed above continue to apply.

#### **Cost Share Payments**

Step #	Responsible Partner(s)	Detail
Step 1	Participant/ Income Maintenance (IM) Worker	The participant files an initial application for Medicaid at the county Income Maintenance (IM) Office. Personal financial information is provided and the worker enters the information into the CARES System.
Step 2	IM	A notice is sent to the participant informing him/her of the application result. The monthly cost share obligation amount, when required for financial eligibility is included in this notice.
Step 3	ADRC	Referral of eligible persons is made to the IRIS Consultant Agency (ICA) when the person selects the IRIS program for long term care.
Step 4	FEA	The payment obligation is recorded and documented in the participant's FMS 3000 account.
Step 5	Participant	Cost share payment is required by the 5 <sup>th</sup> of the month to the IRIS Fiscal Employer Agent (FEA).



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Step 6	FEA	The FEA receives the payment and deposits the payment into the designated DHS bank account.
Step 7	FEA	The monthly cost share payment statement is sent to the participant.
Step 8	ICA	People who are in arrears receive notice of the opportunity to negotiate a repayment agreement.

#### **Monitoring**

Step 9	DHS	Provides information to the ICA and FEA (report or database access) on cost share due amounts.
Step 10	FEA	Documents whether the cost share was paid each month.
Step 11	DHS/ICA/ FEA	Complete monthly review of cost share delinquencies.

### 2.2B.2 Referral to Collections

#### **Business Rules**

- 1. Cost share is the amount of a participant's income paid each month toward the cost of planned supports and services.
- 2. The cost share payment is a condition of Medicaid financial eligibility for participants determined to have a cost share by the Income Maintenance Agency.
- 3. Participants failing to pay the required cost share may negotiate a repayment plan. Repayment plans must cure the cost share default amount within 12 months.
- 4. Persons failing to arrange a repayment plan are referred for IRIS Program disenrollment when the person's cost share payments are 90 days in arrears.
- 5. Participants leaving the program with outstanding delinquency are referred to The Department of Health Services collections.
- 6. The program refers delinquent accounts to collections using F-80921.
- 7. Once at collections, the program accepts no further payments and the person has 90 days to pay in full.
- 8. Failure to cure the default with DHS collections may result in referral to Department of Revenue (DOR), where a collection fee of 15% of the unpaid balance or \$35.00 (whichever is greater) is added to the amount due.

### **Referral to Collections**

Step #	Responsible Partner(s)	Detail
Step 1	Participant	The participant disenrolls from the program with an outstanding cost share. An offer to repay the arrears may or may not have been executed.
Step 2	FEA	Documents amount in arrears and the nonpayment months in FMS 3000.
Step 3	ICA	Prepares a single page summary of the delinquency using information from the FEA, the ICA cost share specialists and others.
Step 4	ICA	Completes referral form F-80921 and attaches the delinquency summary.



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Step 5	ICA	Forwards the completed F-80921 to The DHS representative.
Step 6	DHS	Reviews and approves the submitted F-80921 and documents the referral into SharePoint.
Step 7	DHS	Forwards the approved Form F-80921 to DHS / Division of Enterprise Services (DES) / Bureau of Fiscal Services (BFS) for processing.
Step 8	DHS/DES/ BFS	Provides individuals written notice of the 90 days to pay the delinquency in full or they may be referred to Department of Revenue Collections (DOR).
Step 9	DOR	Adds collection fee to delinquency and attempts to collect the debt.
Step 10	DOR	Intercepts the delinquent's Wisconsin Tax refunds, processes garnishments, seizure or levy against property including bank accounts, IRAs and assigns delinquent tax warrants with the County Clerk of Courts. This warrant acts as a judgment and lien on owned real and personal property.

#### **Monitoring**

Step 11	FEA	Provides information to the ICA (report) on cost share due amounts.
Step 12	ICA	Reconciles the delinquent cost share report with the disenrollment report.
Step 13	DHS	Monthly Review of Cost Share delinquency disenrollments and referrals to collections.

# **Chapter 5: Person-Centered Planning**

## **5.7A.1 Budget Amendment Process**

#### **Business Rules**

- IRIS Consultant Agencies (ICAs) maintain responsibility for training IRIS participants and staff on the Budget Amendment (BA) process using the document, "Participant Education: Budget Amendments (<u>F-01205B</u>)." IRIS Consultants (ICs) provide this document and corresponding education to IRIS participants each time he/she requests a BA.
- 2. The ICAs are responsible to assist the IRIS participant and/or legal representative to navigate the BA process.
- 3. The ICAs are responsible for submission of the IRIS participant's request within 30 days of the IRIS participant and/or legal representative identifying the need for additional funding in the Individual Budget Allocation.
- 4. Only one service/support/good is allowed on each request form and each SharePoint entry. For example, if the IRIS participant wants to add budget to fund three different services/supports/goods, then the IC submits three forms and three SharePoint entries.
- 5. IRIS participants requesting an increase in his/her budget of 25% of more for care-related services and/or supports (Supportive Home Care, Respite, Daily Living Skills, Adult Day Care or Adult Day Services) must first have a change in condition Long Term Care Functional Screen (LTC FS) completed. A change in condition LTC FS may reflect an increase in budget sufficient to meet the IRIS participant's needs without undergoing the BA process.



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- 6. BA requests for additional Supportive Home Care (SHC) hours for shared tasks in a shared household (Ex. Cleaning the common areas or preparing meals that the entire household will eat) are only accepted when compliant with IRIS Policy Manual Section 5.5 regarding Caregiver Hour Assurances.
- 7. BA requests require the following documentation:
  - Signed Participant Education Budget Amendments sheet,
  - Budget Amendment Request (<u>F-01210</u>),
  - Budget Amendment Provider Quote Comparison (F-01210A),
  - LTC FS(s),
  - SHC Hour Tool,
  - Current Individual Support and Service Plan (ISSP), and
  - Any other documentation the IRIS participant and/or legal representative deems relative to the request.

ICAs attach the required documents to the record in the DHS/BA SharePoint site. For BA requests related to Project SEARCH, the IRIS Confirmation of Funding form (<u>F-01230</u>) must also be included.

- 8. The ISSPs submitted as part of the BA request must clearly define the service/support/good, the provider(s), the number of units and rate for each provider, and the long-term care outcome the service/support/good supports. The total plan cost of the current ISSP must not exceed the budget amount provided via the LTC FS. All natural supports and any services received through funding sources other than IRIS must be included on the plan. All services/supports/goods paid for with IRIS Program funds must be allowable Medicaid Home and Community-Based Waiver services.
- 9. The BA Provider Quote Comparison must demonstrate that the providers' bids are equitable in terms of support/services. A minimum of three quotes/bids must be included on the form.
- 10. The provider comparison form provides the opportunity for the IRIS participant to indicate his/her preferred provider. The DHS Review Committee is not obligated to approve the IRIS participant's preferred provider if another provider would be more cost effective.
- 11. The ICA and DHS must use the DHS/BA SharePoint site to:
  - submit the BA request,
  - exchange all communication between the ICA and the Department relative to the BA request,
  - track the progress of the submitted request,
  - review the request, and
  - track the mailing of the letters and Notices of Action.



- The ICAs and DHS must complete the fields in the DHS/BA SharePoint site as per the DHS/BA SharePoint Instruction Guide.
- 12. The DHS and ICA enter all communication (email, phone call, fax, letter) exchanged in the "Contact Log Field" in the DHS/BA SharePoint site. The party initiating the phone call maintains responsibility to log the call in the DHS/BA SharePoint site. DHS documents directives to the ICA requesting additional work in the "Comments/Conditions/Modifications" field in the DHS/BA SharePoint site.
- 13. The DHS Review Committee will not adjust plans as part of the review process. DHS returns the request to the ICA for additional work before review, or DHS approves, limits, modifies, or denies the request as submitted. The IRIS participant, legal representative, and IC maintain responsibility to ensure all requests are: complete, are cost-effective and accurate related to the information presented.
- 14. The DHS Review Committee reviews records in the DHS/BA SharePoint site with the status, "Pending Review" as of noon on Thursday when the request meets the requirements in the "Pre-Review" section.
- 15. IRIS participants seeking additional SHC hours must ensure that he/she has maximized any care hours available through Private Duty Nursing, IRIS Self-Directed Personal Care (IRIS SDPC) or Medical Assistance Personal Care (MAPC), prior to requesting additional hours.
- 16. IRIS participants cannot request additional IRIS SDPC hours through the BA process.
- 17. The ICA is responsible for notification of the appropriate FEA of an approved BA by sending the FEA the updated ISSP reflecting the approved request.
- 18. BA requests for Project SEARCH funding must follow the work instructions outlined in the IRIS Work Instruction Manual Section 5.9 regarding requesting funds for Project SEARCH.
- 19. IRIS participants who meet any of the following criteria are not eligible for BAs:
  - The IRIS participant resides in a 1-2 Bed Adult Family Home, 3-4 Bed Adult Family Home, Residential
    Care Apartment Complex, or Community-Based Residential Facility and does not intend to move into an
    independent community living setting.
  - The IRIS program is in the process of disenrolling the IRIS participant.
  - The IRIS participant is delinquent in cost share or spend down payments.

## Identifying the Need for a Budget Amendment

Step #	Responsible Partner(s)	Detail
Step 1	IRIS Participant	Upon identifying the need for additional supports or services that will exceed his/her existing budget, the IRIS participant is responsible to notify his/her IC to initiate the BA process. The IRIS participant and/or legal representative is responsible to provide the required information for a BA request.



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Step 2	IC	The IC reviews the IRIS participant's budget, plan, natural supports, other available funding sources, and SHC hours tool, to determine whether there is another way to meet the IRIS participant's need using the existing budget.
Step 3	IC, LTC FS Screener	If the IRIS participant is requesting an increase of 25% or more of his/her budget for additional care-related supports, then the IC arranges for an LTC FS Screener to administer a change in condition LTC FS. This process will determine whether the change in condition increases the person's budget such that a BA is unnecessary.
Step 4	IC, IRIS Participant	The IC and IRIS participant and/or his/her legal representative, discuss the outcome of Steps 2 and 3 to determine whether a BA is necessary. If the IRIS participant's needs can be met by adjusting the current ISSP/budget, then a BA is unnecessary. The IC submits a plan amendment to update the service(s) on the ISSP to meet the IRIS participant's needs.
Budget A	mendment Sul	bmission Process
Step 5	IC, Participant	The IRIS participant and the IC collaboratively complete the BA Request. The IC is responsible to ensure all fields are complete.
Step 6	ICA	Upon the IRIS participant's identification of the need for additional funding, the ICA initiates the request in the DHS/BA SharePoint site. The status of the case in the DHS/BA SharePoint site is "Open" while the IC and IRIS participant collect the required information. Once initiated, the ICA assigns the DHS/BA SharePoint record to the designated ICA representative.
Step 7	IC, ICA	<ul> <li>The IC and ICA are responsible to collect the following information from the IRIS participant:</li> <li>Budget Amendment Request (F-01210);</li> <li>Budget Amendment Provider Quote Comparison (F-01210A);</li> <li>LTC FS;</li> <li>SHC Hour Tool;</li> <li>Current ISSP; and</li> <li>Any other documentation the IRIS participant and/or legal representative deems relative to the request.</li> <li>The ICA is responsible for attaching the required documentation to the record in the DHS/BA SharePoint site. If a change in condition rescreen was required, then the ICA attaches both the most recent annual LTC FS and the change in condition LTC FS.</li> </ul>
Step 8	ICA	Upon the completion and attachment of all documentation, and the completion of all required fields in the DHS/BA SharePoint site, the ICA submits this information to DHS. The ICA changes the DHS/BA SharePoint site status to "Pending Review" and assigns the designated DHS Representative. The system generates an email to the DHS Representative notifying him/her of the request.
Pre-Revie	ew Process	
Step 9	DHS	The DHS representative completes a pre-review of the record in the DHS/BA SharePoint site including all attached documents to ensure the request is complete and accurate prior to reviewing the request. The DHS representative pre-reviews the request to ensure compliance with the following requirements:  • The IRIS participant is eligible for a BA as per Business Rule #19.  • The ICA completed all of the required fields.  • The ICA attached all of the required documents.



		<ul> <li>The ICA attached a change in condition LTC FS when the request is for an increase of 25% or greater of the existing budget.</li> <li>The attached ISSP is in compliance with the requirements in Business Rule #8.</li> <li>There is adequate justification for SHC hours that are in excess of the SHC hours recommended by the SHC Hour Tool.</li> <li>NOTE: The DHS representative may return the request to the ICA for additional work for other reasons as this list is not all-inclusive.</li> </ul>
Step 10	DHS	The DHS representative assigns a "DHS Review Date" and assigns the record to the other DHS Review Committee member(s) in the DHS/BA SharePoint site when the DHS representative indicates the request is ready for DHS review.
Step 11	DHS	The DHS representative changes the "Status" and the "DHS Decision" to "Returned to ICA for Additional Work" when the DHS representative determines a need for additional information or corrections during the pre-review. The DHS representative enters a description of the needed information in the "Comments/Conditions/ Modifications" field.
Step 12	ICA	The ICA is responsible for the collection of all outstanding information requested by DHS. The ICA changes the status back to "Pending Review" once the ICA updates and attaches the information to the record in the DHS/BA SharePoint site.
Step 13	DHS, ICA	Steps 9-12 recur until the DHS representative considers the BA request ready for DHS review, or the IC and the IRIS participant come to the conclusion that the request cannot meet the requirements for a BA. In this case, the IRIS participant withdraws the BA request.
DHS Revi	iew	
Step 14	DHS Review Committee	Each Tuesday, the DHS Review Committee reviews the provided information to ensure the request is the most appropriate and cost-effective way to meet the IRIS participant's identified need(s). The DHS Review Committee will: approve; approve with conditions/modifications/time restrictions; limit; or deny the request. The DHS Review Committee only reviews requests that the DHS representative indicated as passing the "Prereview" process and labeled with the status, "Pending Review", as of the previous Thursday.
Step 15	DHS/ICA	Following the review, the DHS Representative completes the following fields in the DHS/BA SharePoint site to record the decision: "DHS Decision," "Comments/Conditions/ Modifications," "DHS Decision Date," "Decision Letter Issue Date," "Approved Increase," "Duration of Approval," "If Denied, Deciding Factor," and "Date to Send NOA if Independent Review Request Not Received." The ICA is required to review decisions in the DHS/BA SharePoint site every Wednesday.
Step 16	DHS	The DHS Representative changes the status to "Decision Issued" and attaches the IRIS participant notification letters to the DHS/BA SharePoint record. DHS dates the letter two days in the future to allow the ICA time to mail the letter without impeding the IRIS participant's ten day response time.
Step 17	ICA	The ICA mails the DHS decision letter (Budget Amendment/One-Time Expense Approval Letter – F-01211, Budget Amendment/One-Time Expense Approval Letter – F-01211A, or Budget Amendment/One-Time Expense Denial Letter – F-01211B) attached in SharePoint to the IRIS participant within two calendar days of the decision (by Thursday). The letter communicates the decision to the IRIS participant, and in the case of a denial, the letter also communicates the IRIS participant's option for an Independent Review.



Step 18	DHS	The DHS Representative monitors incoming mail for communication from the IRIS participant requesting an Independent Review.		
Independ	Independent Review Process			
Step 19	IRIS Participant, IC	Upon receipt of the DHS decision letter, the IRIS participant chooses whether he/she wants to pursue an Independent Review of the DHS Review Committee's denial of his/her BA request. The IRIS participant mails additional information or clarification for additional consideration to:  IRIS Section Chief P.O. Box 7851		
	ic	1 West Wilson, Rm. 418 Madison, WI 53707-7851		
		The IRIS participant ensures DHS receives his/her request for an Independent Review within ten calendar days of the date on the DHS Decision letter.		
Step 20	DHS	Upon receipt of the IRIS participant's request for an Independent Review, the DHS Representative changes the status to "Independent Review Requested", completes the Independent Review Request Received field, and assigns the record to the IRIS Section Chief. The DHS Representative scans and attaches the IRIS participant's letter and accompanying materials submitted with the Independent Review request. The DHS representative attaches this documentation to the request record in the DHS/BA SharePoint site.		
Step 21	DHS Independent Review Committee	The Independent Review Committee (IRC) includes DHS employees who review the original BA request submitted and the additional information submitted. The DHS Independent Review Committee is at the direction of the IRIS Section Chief and does not have any members in common with the Initial BA Review Committee completing the initial review. The DHS Independent Review Committee will either overturn or uphold the DHS Initial BA Review Committee's initial decision.		
Step 22	DHS	Upon completion of the Independent Review, the DHS Representative completes the following fields in the DHS/BA SharePoint site: "Date Independent Review Request Received," "Justification for Independent Review," "Independent Review Decision," "Independent Review Decision Date."		
Step 23	DHS	Upon completion of the Independent Review, the DHS Representative generates the appropriate Independent Review decision letter (Budget Amendment/One-Time Expense – IR Combination Letter – F-01211C, Budget Amendment/One-Time Expense – IR Overturned Letter – F-01211D, or Budget Amendment/One-Time Expense – IR Upheld Letter – F-01211E) communicating the outcome of the Independent Review to the participant. The DHS representative attaches the letter to the request record in the DHS/BA SharePoint site. The DHS representative will change the status to "Independent Review - Decision Issued."		



Step 24	ICA	The ICA mails the Independent Review decision letter attached in SharePoint to the IRIS participant. When the Independent Review committee's decision aligns with the original decision, meaning the request remains denied/modified/limited, the ICA includes an NOA using the information provided in the DHS/BA SharePoint site and in the decision letter to the IRIS participant. Whether the original denial is upheld or overturned, the ICA mails the Independent Review decision letter immediately. Upon mailing the letter, the ICA changes the status to "DHS – Contract Compliance Review."
Step 25	ICA	When DHS issues an NOA, DHS initiates a record in the DHS/NOA SharePoint site. DHS completes the following sections in the DHS/BA SharePoint site: "Date NOA Sent" and "BA/OTE Case Number."
Step 26	DHS/ICA	When the IRIS participant does not request an Independent Review within the ten day timeframe, DHS completes and attaches a Budget Amendment/One-Time Expense - Non-Response Letter (F-01211F) and NOA in SharePoint. The DHS Representative changes the status to "Independent Review – Decision Issued" to notify the ICA to mail the non-response letter. The ICA then completes Steps 24 and 25.
Appeals F	Process	
Step 27	IRIS Participant, IC	When the IRIS participant receives the NOA, he/she also receives information regarding the fair hearing process. The IRIS participant chooses to accept DHS' decision or to request a fair hearing. The IC is responsible to assist the IRIS participant in navigating the appeals process.
Step 28	ICA	The ICA is responsible to update information relative to the NOA in the DHS/NOA SharePoint site. No information regarding the fair hearing process is stored in the DHS/BA SharePoint site once the ICA mails the NOA.
Monitoria	ng Process	
Step 29	DHS	When DHS approves the initial request, DHS completes the following sections in the DHS/BA SharePoint site after verifying the ICA sent the approval letter: "Request Information Correct," and "If Not, Why?" The DHS Representative changes the status from "DHS – Contract Compliance Review" to "Closed."
Step 30	DHS	When DHS denies/modifies/limits the initial request and the IRIS participant does not request an Independent Review within ten business days, DHS completes the following sections in the DHS/BA SharePoint site after the letter and NOA are sent: "Request Information Correct," and "If Not, Why?." The DHS Representative changes the status from "DHS – Contract Compliance Review" to "Closed."
Step 31	DHS	When DHS denies/modifies/limits the initial request and the IRIS participant requests an Independent Review, DHS completes the following sections in the DHS/BA SharePoint site after the Independent Review is complete and the letter and NOA are sent: "Request Information Correct" and "If Not, Why?." The DHS Representative changes the status from "DHS – Contract Compliance Review" to "Closed."



## **Data and Quality Management Process**

Step 32	DHS	DHS extracts data from the DHS/BA SharePoint site on a monthly basis as per the document, "Budget Amendment/One-Time Expense Monthly Data Requirements."
Step 33	DHS Quality Team Lead, ICA Quality	The DHS IRIS Quality Team Lead and the ICA Quality Lead review the BA data and address any performance issues at monthly DHS/ICA Quality Management meetings. Based on this data, DHS may require a Quality Improvement Project. The ICA completes Quality Improvement Projects as per IRIS Policy Manual Section 10.4 and in accordance with any further direction by DHS.

# **5.8D.1 One-Time Expense Requests**

### **Business Rules**

- IRIS Consultant Agencies (ICAs) maintain responsibility for training IRIS participants and staff on the One-Time Expense (OTE) Request process using the document, "Participant Education: One-Time Expense Requests (<u>F-01205C</u>)." IRIS Consultants (ICs) provide this document and corresponding education to IRIS participants each time he/she requests an OTE.
- 2. Each ICA maintains responsibility for assisting the IRIS participant and/or his/her legal representative with the navigation of the OTE process.
- 3. Each ICA maintains responsibility for submitting the IRIS participant's OTE request, including bids, within 60 days of the IRIS participant and/or his/her legal representative identifying the need for additional funding.
- 4. The IC maintains responsibility to request only one service/support/good per request form and per SharePoint entry. For example, the IC submits three forms and three SharePoint entries when an IRIS participant wants to add to their budget to fund three different services/supports/goods. However, all components of a bathroom modification project, for example, can be on the same OTE request. The IC submits one OTE request for a bathroom modification that includes the new floor, new tub, and wider doorway.
- 5. Materials used in home modifications must be the most cost-effective available. For example, the DHS Review Committee does not approve OTE requests in which the flooring material in the bid was for an expensive material, when more cost-effective alternatives are available and appropriate.
- 6. The IC maintains responsibility to ensure OTE requests for home modifications only include improvements related to the IRIS participant's disability. For example, when an IRIS participant needs his/her bathroom doorway widened to accommodate his/her wheelchair, it is not appropriate to request a new vanity and bathroom sink if the vanity and cabinet replacement are not related to the IRIS participant's disability. However, if the vanity/sink modification is needed to accommodate the wheelchair, it is permissible to enable the participant to be more independent.



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- 7. The IRIS participant and IC must submit a required accessibility assessment completed by a qualified assessor who is independent of the contractor, for all home or vehicle modifications.
- 8. The vendor comparison sheet must demonstrate that the bids are equitable in terms of materials and tasks to be completed. The IRIS participant is required to submit a minimum of three bids. For example:
  - a. Conflict/Non-Comparable Materials: A vendor comparison sheet that has one vendor proposing linoleum and another vendor proposing tile for the flooring of a home modification is not acceptable, as an accurate comparison between the estimates cannot be made.
  - b. Conflict/Non-Comparable Tasks: A vendor comparison sheet that has one vendor proposing lowering the kitchen countertops, and another vendor proposing lowering the countertops *and* replacing the kitchen floor is not acceptable as an accurate comparison between the estimates cannot be made.
- 9. The vendor comparison sheet provides the opportunity for the IRIS participant to indicate his/her preferred vendor. The DHS Review Committee is not obligated to approve the IRIS participant's preferred vendor when another vendor would be more cost effective.
- 10. The OTE request must include the following documentation: a signed Participant Education sheet, OTE Request Form, Vendor Comparison Form, bids from three vendors, Accessibility Assessment, a current Long Term Care Functional Screen (LTC FS), Supportive Home Care (SHC) Hour Tool, a current Individual Support and Service Plan (ISSP), and any other documentation the IRIS participant and/or his/her legal representative deems relative to the request. The ICA attaches the required documents to the record in the DHS/OTE SharePoint site.
- 11. An OTE request for a van lift must include the following information: make/model of the vehicle, make/model of the wheelchair, and make/model of the proposed van lift.
- 12. ISSPs submitted as part of the OTE request must clearly define the service/support/good, the provider(s), the number of units and rate for each provider, and the long-term care outcome the service/support/good supports. The total plan cost of the current ISSP must not exceed the budget amount provided via the LTC FS. All natural supports and any services received through funding sources other than IRIS must be included on the plan. All services/supports/goods paid for with IRIS funds must be allowable Medicaid Waiver Services.
- 13. The IRIS participant must have a valid driver's license when the OTE request is for modification of the driver's seat/steering mechanism of a vehicle, which the IRIS participant intends to drive.
- 14. The ICA and DHS use the DHS/OTE SharePoint site to submit the OTE request, exchange all communication between the ICA and the DHS relative to the OTE request, track the progress of the submitted request, review the request, and track the mailing of the letters and Notices of Action (NOA). The ICA and DHS must complete the fields in the DHS/OTE SharePoint site as per the DHS/OTE SharePoint Instruction Guide.



- 15. The DHS and the ICA enter all communication (email, phone call, fax, letter) exchanged in the "Contact Log Field" in the DHS/OTE SharePoint site. The party initiating the phone call maintains responsibility to log the call in the DHS/OTE SharePoint site. DHS documents directives to the ICA requesting additional work in the "Comments/Conditions/Modifications" field in the DHS/OTE SharePoint site.
- 16. The DHS Review Committee will not manipulate the ISSP or other aspect of the submitted plans as part of the review process. DHS returns the request to the ICA for additional work before review, and before DHS issues an approval, limitation, modification, or denial of the OTE request as submitted. The IRIS participant, legal representative, and IC maintain responsibility to ensure all requests are complete, are cost-effective, and that the information presented provides clarity regarding the request and the manner in which the request will meet the person's long-term care need.
- 17. The DHS Review Committee reviews records in the DHS/OTE SharePoint site with the status, "Pending Review" as of noon on Thursday on the preceding week. The DHS Review Committee meets each Tuesday to review requests that meet the requirements in the "Pre-Review" section.
- 18. The ICA maintains responsibility to notify the appropriate FEA of an approved OTE request by sending the FEA the updated ISSP reflecting the approved request.
- 19. IRIS participants who meet any of the following criteria are not eligible for OTEs:
  - The IRIS participant resides in a 1-2 Bed Adult Family Home, 3-4 Bed Adult Family Home, Residential Care Apartment Complex, or Community-Based Residential Facility and does not intend to move into the community.
  - The IRIS program is in the process of disenrolling the IRIS participant.
  - The IRIS participant is delinquent in cost share or spend down payments.

#### **Identifying Needs for One-Time Expense**

Step #	Responsible Partner(s)	Detail
Step 1	IRIS Participant	Upon identifying the need for additional cares that will cost more than his/her existing IRIS budget, the IRIS participant is responsible to notify his/her IC to initiate the OTE request process. The IRIS participant and/or his/her legal representative maintain responsibility to provide the required information to submit the OTE request.
Step 2	IC	The IC will review the IRIS participant's budget, plan, natural supports, other available funding sources, and SHC hour's tool to determine whether there is any way to meet the IRIS participant's need using the existing budget.



Step 3	IC, IRIS Participant	The IC and IRIS participant and/or his/her legal representative discuss the outcome of Step 2 to determine when an OTE request is necessary. If the IRIS participant's needs can be met by adjusting the current ISSP/budget and an OTE request is unnecessary, then the IC submits a plan amendment to update the service(s) on the ISSP to meet the IRIS participant's needs.
One-Time	e Expense Sub	mission Process
Step 4	IC, Participant	The IRIS participant and the IC collaboratively complete the OTE Request. The IC maintains responsibility to ensure all fields are completed.
Step 5	ICA	Upon the IRIS participant's identification of the need for additional funding, the ICA initiates the request in the DHS/OTE SharePoint site. The status of the case in the DHS/OTE SharePoint site is "Open" while the IC and IRIS participant collect the required information. Once initiated, the ICA assigns the DHS/OTE SharePoint record to the designated ICA representative.
Step 6	IC, ICA	The IC and ICA maintain responsibility to collect the following information:  One-Time Expense Request (F-01206); One-Time Expense Vendor Bid Comparison (F-01206A); Bids from three vendors; An Accessibility Assessment (F-01213); One-Time Expense Request – Ramp (F-01206B) (if applicable); A current LTC FS; A completed SHC Hour Tool; The current ISSP; and Any other documentation the IRIS participant and/or legal representative deems relative to the request.  The ICA maintains responsibility to attach the required documentation to the record in the DHS/OTE SharePoint site.
Step 7	ICA	Upon the completion and attachment of all documentation, and the completion of all required fields in the DHS/OTE SharePoint site, the ICA maintains responsibility to submit this information to DHS. The ICA changes the DHS/OTE SharePoint site status to "Pending Review" and assigns the designated DHS Representative. The system generates an email to the DHS Representative notifying him/her to review the request



## **Pre-Review Process**

Pre-Review Process			
Step 8	DHS	The DHS representative completes a pre-review of the record in the DHS/OTE SharePoint site including all attached documents to ensure the request is complete and accurate prior to reviewing the OTE request,. The DHS representative pre-reviews the request includes the following requirements:  • The IRIS participant is eligible for an OTE as per Business Rule #19.  • The ICA completed all of the required fields.  • The ICA attached all of the required documents.  • The ICA attached three comparable bids.  • The attached ISSP complies with the requirements in Business Rule #12.  • There is adequate justification for SHC hours that are in excess of the SHC hours recommended by the SHC Hour Tool.  The DHS representative may return the request to the ICA for additional work for these or other reasons.	
Step 9	DHS	The DHS representative assigns a "DHS Review Date" and assigns the record to the other DHS Review Committee members in the DHS/OTE SharePoint site once the DHS representative indicates the request is ready for DHS review.	
Step 10	DHS	The DHS representative changes the "Status" and the "DHS Decision" to "Returned to ICA for Additional Work" when the DHS representative determines a need for additional information or corrections during the pre-review, The DHS representative enters a description of the needed information in the "Comments/Conditions/ Modifications" field.	
Step 11	ICA	The ICA maintains responsibility to collect all outstanding information requested by DHS. When the ICA updates and attaches the information to the record in the DHS/OTE SharePoint site, the ICA changes the status back to "Pending Review."	
Step 12	DHS, ICA	Steps 8-11 recur until the DHS representative considers the OTE request ready for DHS review, or the IC and the IRIS participant conclude that the request cannot meet the requirements for an OTE. In this case, the IRIS participant withdraws the OTE request.	
DHS Rev	iew		
Step 13	DHS Review Committee	Each Tuesday, the DHS Review Committee reviews the OTE request and information to ensure the request is the most appropriate and cost-effective way to meet the IRIS participant's identified need(s). The DHS Review Committee approves, approves with conditions/modifications/time restrictions, limits, or denies the request. The DHS Review Committee only reviews requests that the DHS representative has indicated have passed the "Pre-review" process and labeled with the status, "Pending Review," as of the previous Thursday.	
Step 14	DHS/ICA	Following the review, the DHS Representative completes the following fields in the DHS/OTE SharePoint site to record the decision: "DHS Decision," "Comments/Conditions/ Modifications," "DHS Decision Date," "Decision Letter Issue Date," "Approved Increase," "Duration of Approval," "If Denied, Deciding Factor," or "Date to Send NOA if Independent Review Request Not Received."  The ICA maintains responsibility to review decisions in the DHS/OTE SharePoint site every	



		Wednesday.
Step 15	DHS	The DHS Representative changes the SharePoint status to "Decision Issued" and attaches the IRIS participant notification letters to the DHS/OTE SharePoint record. DHS dates the letter two days in the future to allow the ICA time to mail the letter without impeding the IRIS participant's ten day response time.
Step 16	ICA	The ICA mails the DHS decision letter (Budget Amendment/OTE Approval Letter – F-01211, Budget Amendment/OTE Approval Letter – F-01211A, or Budget Amendment/OTE Denial Letter – F-01211B) attached in SharePoint to the IRIS participant within two calendar days of the decision (by Thursday). The letter communicates the decision to the IRIS participant, and in the event of a denial, the letter also communicates the IRIS participant's option for an Independent Review.
Step 17	DHS	The DHS Representative monitors incoming mail for communication from the IRIS participant requesting an Independent Review.
Independ	ent Review Pr	ocess
Step 18	IRIS Participant, IC	Upon receipt of the DHS decision letter, the IRIS participant chooses whether he/she wants to pursue an Independent Review of the DHS Review Committee's denial of his/her OTE request. The IRIS participant mails additional information or clarification for additional consideration to:  Department of Health Services IRIS Section Chief P.O. Box 7851 1 West Wilson, Rm. 418 Madison, WI 53707-7851  The IRIS participant must ensure that DHS receives his/her request for an Independent Review within ten calendar days of the date on the DHS Decision letter.
Step 19	DHS	Upon receipt of the IRIS participant's request for an Independent Review, the DHS Representative changes the status to "Independent Review Requested," completes the Independent Review Request Received field, and assigns the record to the IRIS Section Chief. The DHS Representative scans and attaches the IRIS participant's letter and accompanying materials sent with the Independent Review request. The DHS representative attaches this documentation to the request record in the DHS/OTE SharePoint site.
Step 20	DHS Independent Review Committee	A secondary review committee made up of DHS employees will review the original OTE request submitted and the additional information submitted. The DHS Independent Review Committee is convened by the IRIS Section Chief and does not have any members in common with the DHS Review Committee completing the initial review. The DHS Independent Review Committee may either overturn or uphold the DHS Review Committee's initial decision.



Step 21	DHS	Upon completion of the Independent Review, the DHS Representative completes the following fields in the DHS/OTE SharePoint site: "Date Independent Review Request Received," "Justification for Independent Review," "Independent Review Decision," "Independent Review Decision Date."
Step 22	DHS	Upon completion of the Independent Review, the DHS Representative generates the appropriate Independent Review decision letter (Budget Amendment/OTE – IR Combination Letter – F-01211C, Budget Amendment/OTE – IR Overturned Letter – F-01211D, or Budget Amendment/OTE – IR Upheld Letter – F-01211E) communicating the outcome of the Independent Review to the participant. The DHS representative attaches the letter to the request record in the DHS/OTE SharePoint site. The DHS representative will change the status to "Independent Review - Decision Issued."
Step 23	ICA	The ICA mails the Independent Review decision letter attached in SharePoint to the IRIS participant. When the Independent Review committee's decision aligns with the original decision, meaning the request remains denied/modified/limited, the ICA includes a Notice of Action (F-01204) using the information provided in the DHS/OTE SharePoint site and in the decision letter to the IRIS participant. Whether the original denial is upheld or overturned, the ICA mails the Independent Review decision letter immediately. Upon mailing the letter, the ICA changes the status to "DHS – Contract Compliance Review."
Step 24	ICA	When DHS issues an NOA, DHS initiates a record in the DHS/NOA SharePoint site. DHS completes the following sections in the DHS/OTE SharePoint site: "Date NOA Sent" and "BA/OTE Case Number."
Step 25	DHS/ICA	When the IRIS participant does not request an Independent Review within the ten day timeframe, DHS completes and attaches a Budget Amendment/OTE - Non-Response Letter (F-01211F) and NOA in SharePoint. The DHS Representative changes the status to "Independent Review – Decision Issued" to notify the ICA to mail the non-response letter. The ICA then completes Steps 23 and 24.
Appeals I	Process	
Step 26	IRIS Participant, IC	When the IRIS participant receives the NOA, he/she also receives information regarding the fair hearing process. The IRIS participant may choose to accept DHS' decision or request a fair hearing. The IC maintains responsibility to assist the IRIS participant in navigating the appeals process.
Step 27	ICA	The ICA maintains responsibility to update information relative to the NOA in the DHS/NOA SharePoint site. Information regarding the fair hearing process is not stored in the DHS/OTE SharePoint site once the ICA mails the NOA.
Monitorii	ng Process	
Step 28	DHS	When DHS approves the initial request, DHS completes the following sections in the DHS/OTE SharePoint site after verifying the ICA sent the approval letter: "Request Information Correct," and "If Not, Why?" The DHS Representative changes the status from "DHS – Contract Compliance Review" to "Closed."



Step 29	DHS	When DHS denies/limits/modifies the initial request and the IRIS participant does not request an Independent Review within ten business days, DHS completes the following sections in the DHS/OTE SharePoint site after the letter and NOA are sent: "Request Information Correct," and "If Not, Why?." The DHS Representative changes the status from "DHS – Contract Compliance Review" to "Closed."
Step 30	DHS	When DHS denies/limits/modifies the initial request and the IRIS participant requests an Independent Review, DHS completes the following sections in the DHS/OTE SharePoint site after the Independent Review is complete and the letter and NOA are sent: "Request Information Correct" and "If Not, Why?." The DHS Representative changes the status from "DHS – Contract Compliance Review" to "Closed."

## **Data and Quality Management Process**

Step 31	DHS	DHS extracts data from the DHS/BA SharePoint site on a monthly basis as per the document, "Budget Amendment/OTE Monthly Data Requirements."
Step 32	DHS Quality Team Lead, ICA Quality	The DHS IRIS Quality Team Lead and the ICA Quality Lead review the OTE data and address any performance issues at monthly DHS/ICA Quality Management meetings. Based on this data, DHS may require a Quality Improvement Project. The ICA completes Quality Improvement Projects as per IRIS Policy Manual Section 10.4 and in accordance with any further direction by DHS.

# **5.9E.1 Project SEARCH**

#### **Business Rules**

- 1. For information or clarification on these instructions contact the Department of Health Services (DHS) IRIS Employment Lead: Chris Sell Email: <a href="mailto:Christopher.Sell@dhs.wisconsin.gov">Christopher.Sell@dhs.wisconsin.gov</a> Phone: 608-267-7718.
- 2. Important dates for Project SEARCH. NOTE: The annual timeline for Project SEARCH programs typically coincides with the State of Wisconsin's Public School system school year.
  - a. The Project SEARCH application process typically occurs during the winter or spring months and may differ depending on the Project SEARCH site.
  - b. Applicants are notified of their acceptance to Project SEARCH during the spring or summer months. The actual date of acceptance is determined by the Project SEARCH site.
  - c. The Project SEARCH program begins in August or September and the Project SEARCH site begins billing the participant monthly for the monthly prorated Project SEARCH program fees.
- 3. The Department is committed to increasing integrated employment opportunities and outcomes. The Project SEARCH model has shown integrated, competitive employment outcomes for approximately 85% of Project SEARCH program graduates. Therefore, if an IRIS participant is accepted into a Project SEARCH program, then IRIS will fund the DHS portion of the Project SEARCH program fees. This is supported by the Department's issuance of a Project SEARCH Confirmation of Funding Letter (F-01230).



- 4. The Project SEARCH program requires collaboration from DHS, the Department of Workforce Development Division of Vocational Rehabilitation (DWD-DVR), and the Department of Public Instruction (DPI). The IRIS Consultant Agency (ICA) must work collaboratively with these partners during and after the Project SEARCH program.
- 5. The ICA is responsible for identifying Project SEARCH sites that serve adults (18 25 years old) and potential IRIS participants in their service region. Not all Project SEARCH sites serve adults. The current list of Project SEARCH sites can be found here: <a href="http://www.projectsearch.us/GetINVOLVED/FindaProgram.aspx">http://www.projectsearch.us/GetINVOLVED/FindaProgram.aspx</a>
- 6. The ICA is responsible for identifying participants ages 18-25 years old as potential Project SEARCH applicants.

#### **Identification, Outreach & Assessment**

Step #	Responsible Partner(s)	Detail
Step 1	Consultant, Participant	The IRIS Consultant (consultant) identifies a participant as a potential candidate for Project SEARCH or the IRIS Participant (participant) discloses to their consultant his or her interest in applying for Project SEARCH.
Step 2	Consultant	The consultant shares an overview of the Project SEARCH program and assesses the participant's level of interest in applying for the program.
Step 3	Consultant	The consultant determines whether any Project SEARCH sites serve the participant's region and serves the participant's age group (18 – 25 years old).
Step 4	Consultant	If there are no sites in the participant's region that serve the participant's age group, then the consultant documents the participant's interest in Project SEARCH on their plan and enters a case note indicating the need for follow-up in the next calendar year. In these cases, steps 1 through 4 are completed annually between the months of January and February or until the participant is accepted into the program or aged out of Project SEARCH eligibility. NOTE: Project SEARCH is expanding and new sites may be added in subsequent years. It is important that the consultant checks the current list of Project SEARCH sites at least annually (see Business Rule #5).
Step 5	Participant, Consultant	The consultant or participant identifies a Project SEARCH site in their area.
Step 6	Participant, Consultant	The participant engages the site to see whether there is a Project SEARCH open house that the participant could attend to learn more about Project SEARCH and the Project SEARCH site. The consultant encourages the participant to attend any site-specific open houses or learning opportunities.
Step 7	Participant	The participant decides to apply for Project SEARCH. The participant communicates his or her intent to apply with his or her consultant.

## **Applying for Project SEARCH**

Step 8	Participant The participant or when requested by the participant, the consultant, requests the application materials from the identified Project SEARCH site.		
Step 9	Participant  Parti		
Step 10	Participant,	The participant communicates to his or her consultant the need for a Confirmation of Funding	



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	Consultant	letter to be included with the site-specific Project SEARCH application. If the participant does not request this letter, then the consultant will explain that a Confirmation of Funding letter needs to be submitted as part of the application. Some sites may not require a Confirmation of Funding Letter. Regardless, submitting a Confirmation of Funding letter may improve the likelihood that a participant is accepted into the Project SEARCH program.
Step 11	Consultant	The consultant contacts the DHS Employment Lead (see Business Rule #1 for Employment Lead Contact Information) via email or phone within five (5) business days of the participant notifying the consultant of his or her interest in applying for Project SEARCH. The consultant provides the DHS Employment Lead the name and the Medicaid ID number (MCI ID) of the participant and the identified Project SEARCH site.
Step 12	DHS	The DHS Employment Lead confirms the participant's IRIS program eligibility.
Step 13	DHS	The DHS Employment Lead and DHS IRIS Section Chief complete the Confirmation of Funding letter and provides a copy of the letter to the participant and the consultant within five (5) business days of the consultant's initial communication.
Step 14	Consultant	The IRIS Consultant documents the receipt of the Confirmation of Funding letter on the participant's plan (ISSP) and confirms the participant's the receipt of the letter.
Step 15	Participant	The participant submits the completed site-specific Project SEARCH application and includes a copy of the Confirmation of Funding letter. The application materials must be submitted to the Project SEARCH site prior to the Project SEARCH site's application deadline.
Paying fo	r Project SEA	RCH
Step 16	Project SEARCH site	The Project SEARCH site reviews the participant's application and determines whether the participant is accepted into the program. The Project SEARCH site sends a letter to the participant informing him or her of the acceptance or denial of his or her application.
Step 17	Consultant	In the event that the participant is not accepted into the Project SEARCH program, the consultant documents this on the plan (ISSP), and creates an alert to notify the consultant to engage the participant regarding submitting an application the following calendar year (return to Step 8).
Step 18	Participant, Consultant	The participant informs his or her consultant of his or her acceptance into the Project SEARCH site and provides the consultant with a copy of the acceptance letter. The consultant documents the acceptance letter on the participant's plan (ISSP).
Step 19	Participant, Consultant	The participant and IRIS Consultant must complete a Budget Amendment Request (see Budget Amendment and One-Time Expense Policy 5.8) and submit to the DHS Review Committee for a budget amendment within twenty (20) business days of the receipt of the Project SEARCH site acceptance letter. A copy of the acceptance letter and program fee amount must be submitted with the Budget Amendment Request as justification. The Confirmation of Funding Letter can also be submitted as justification for the participant's budget amendment.
Step 20	Participant, Consultant	Project SEARCH is funded as a "community-based prevocational service" and documented on the plan with the appropriate service code and Project SEARCH modifier (see IRIS Service Code and Definition Manual for appropriate service codes and modifiers).
Step 21	DHS	The DHS Review Committee for Budget Amendments and One-Time Expenses reviews the request based on the protocol within the Budget Amendment and One-Time Expense Policy 5.8 and approves the Budget Amendment to fund the monthly prorated DHS portion of Project SEARCH program fees.
Step 22	DHS, TPA	DHS provides the approved Budget Amendment to the Third Party Claims Administrator (TPA) via a plan update (See Budget Amendment and One-Time Expense Policy 5.8 for



		further detail on the plan update process). Funds for Project Search are reflected on the participant's plan (ISSP) and in the participant's budget.	
Store 22	Project	The Project SEARCH site submits monthly prorated service claims for the Project SEARCH	
Step 23	SEARCH site	Program fee each month that the participant remains in the program. The TPA will issue payment for the claim.	
Step 24	TPA	The TPA pays the claim.	

## After Completion of Project SEARCH Program

Step 25	Consultant, Participant	Once the Project SEARCH program has ended (usually coincides with State's public school year), the consultant contacts the participant and completes a new employment assessment (see Employment Assessment Policy 5.9A).
Step 26	Consultant The consultant continues to collaborate with the DVR until a permanent integrated employment outcome is achieved.	

# **Chapter 6: Participant Choice of Qualified Providers**

# 6.1B.1 Participant-Hired Worker Background Checks

#### **Business Rules**

- 1. The IRIS Policy on Caregiver and Criminal Background Checks is stringent because the IRIS participant directhire and employee-employer relationship increases vulnerability. The policy covers participant-hired workers that are hired directly by the participant.
- 2. The Criminal Background Check includes a review of any criminal conviction record of the participant-hired workers.
- 3. The participant-hired worker must pass both background checks before starting employment.
- 4. The Fiscal Employer Agent may not issue payments to participant-hired worker applicants or participant-hired workers for services rendered before the background checks are completed.
- 5. The participant ensures that all participant-hired worker applicants complete and submit the required Criminal and Caregiver Background Check paperwork to the IRIS Consultant.
- 6. The Fiscal Employer Agent completes both a Caregiver and Criminal Background Check on each proposed participant-hired worker applicant as part of the worker qualification process.
- 7. The Fiscal Employer Agent conducts both background checks at the time of application for employment and every four years thereafter.
- 8. Background Check results are either "pass" or "fail."
- 9. The Fiscal Employer Agent also completes an ad-hoc background check for participant-hired workers for whom reports exist that convictions of crimes listed in this background check policy may have occurred.
- 10. Participant-hired workers and participant-hired worker applicants may appeal background check results to the Department of Health Services.



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- 11. Participant-hired workers and participant-hired worker applicants do not appeal background check results through the Division of Hearings and Appeals.
- 12. The Department of Health Services manages the appeals process using the Background Check Appeals list within the DHS/Program Integrity SharePoint site.
- 13. Participant-hired workers are required to notify the FEA of any criminal convictions.

## **Identification of Applicant and Completion of Paperwork**

Step #	Responsible Partner(s)	Detail	
Step 1	Participant, IRIS Consultant	The participant determines the need for a participant-hired worker to meet his/her long term care related outcomes.	
Step 2	Participant	The participant identifies a potential participant-hired worker.	
Step 3	Participant, IRIS Consultant	The participant and/or IRIS Consultant inform the participant-hired worker applicant of the requirement to complete Criminal and Caregiver Background Checks prior to employment.	
Step 4	Participant, IRIS Consultant	The participant and/or IRIS Consultant inform the participant-hired worker applicant of IRIS Policy Manual Section 6.1B.1 - Business Rule #4, reiterating that no IRIS funds may be disbursed for hours worked prior to the approved background checks.	
Step 5	Applicant	The participant-hired worker applicant completes the Background Information Disclosure (BID) Form ( <u>F-82064</u> ) and returns to participant employer.	
Step 6	Applicant	The participant-hired worker applicant completes the Background Information Disclosure Addendum – IRIS (F-01246) Form and returns it to the participant employer.	
Step 7	Participant, IRIS Consultant	The participant and the IRIS Consultant review all new hire paperwork for completeness and forward the packet to the Fiscal Employer Agent (FEA).	

# **Completion of Background Checks for New Hires**

Step 8	FEA	The FEA submits the required paperwork to the agency with whom they contract for performing background checks within two business days of receiving the paperwork.
Step 9	FEA	The FEA compares any convictions identified in the participant-hired worker applicant's background check against the list of crimes that appear in the <u>Appendix</u> . The participant-hired worker applicant does not pass the background check when he/she has convictions of one, or more, of the crimes listed in the Appendix.



Step 10	FEA	The FEA notifies the participant and participant-hired worker applicant of the background check result (pass or fail) in writing within two business days of receiving the results of the background check. Participant-hired worker applicants who "fail" the background check are not hired. The FEA refers participants and participant-hired worker applicants who "fail" the background check to Steps 20-28 of these work instructions related to the appeal process.		
Step 11	FEA	The FEA logs the date of the passed background check into a tracking mechanism for the purpose of triggering the completion of follow-up background checks within 60 days of each four year anniversary. Follow-up background checks are required at minimum every four years per the approved Medicaid 1915 (c) Home and Community Based Waiver.		
Step 12	FEA	The FEA documents the background check result in the data system and processes the remainder of the new hire paperwork (I-9, SS-4 etc.).		
Completi	on of Schedule	d Background Checks for Ongoing Participant-Hired Workers		
Step 13	FEA	The FEA completes a follow-up background check for all employees within 60 days prior to four years of employment as a participant-hired worker.		
Step 14	FEA	The FEA notifies the participant and participant-hired worker of the background check resul (pass or fail) in writing within two business days of receiving the results of the background check.		
Step 15	FEA, Participant, IC	The participant is required to immediately terminate participant-hired workers who fail the follow up background check immediately. The FEA communicates this requirement via lett to the participant-hired worker and participant. The IRIS Consultant and the participant ens the participant has adequate supports to meet caregiving needs. The FEA refers participants and participant-hired worker applicants who "fail" the background check to Steps 20-28 of these work instructions related to the appeal process.		
Completi	on of Ad-Hoc l	Background Checks for Ongoing Participant-Hired Workers		
Step 16	ICA, FEA	FEA If the IRIS Consultant, IRIS Consultant Agency, or Fiscal Employer Agent receives notification that a current, participant-hired worker may have been convicted of one of the crimes identified in these work instructions, the FEA notifies the participant, in writing, of t need and reason to conduct subsequent background checks.		
Step 17	ICA	The FEA completes the subsequent background checks.		
Step 18	ICA	The FEA notifies the participant and participant-hired worker of the background check result (pass or fail) in writing within two business days of receiving the results of the background checks.		



Step 19	ICA	The participant is required to immediately terminate participant-hired workers who fail the follow up background check. The FEA communicates this requirement, in writing, to the participant-hired worker and participant. The IRIS Consultant and the participant ensure the participant has adequate supports to meet caregiving needs. The FEA refers participants and participant-hired worker applicants who "fail" the background check to Steps 20-28 of these work instructions related to the appeal process.	
DHS App	eal Process for	r Participant-Hired Workers	
Step 20	IRIS Consultant, Participant	If a participant-hired worker applicant or current participant-hired worker does not pass the background check, then the IRIS Consultant discusses, with the participant, the option of hiring the applicant through an agency. This option applies only to convictions for crimes not included in Wisconsin Statute Chapter 50.065 <a href="https://docs.legis.wisconsin.gov/statutes/statutes/50/I/065">docs.legis.wisconsin.gov/statutes/statutes/50/I/065</a> and/or Wisconsin Administrative Code DHS Chapter 12 <a href="https://docs.legis.wisconsin.gov/code/admin">docs.legis.wisconsin.gov/code/admin</a> code/dhs/001/12.pdf	
Step 21	Participant, Participant- Hired Worker	The participant and participant-hired worker may complete the form "IRIS Background Check Appeal Request." Both parties must complete their respective sections on the request form. The participant and participant-hired worker mail the completed form to IRIS Background Check Appeals, P.O. Box 7851, 1 W. Wilson St., Rm. 418, Madison, WI 53707-7851 within 10 business days of the date on the results notification letter. This appeal process applies only to convictions for crimes not included in Wisconsin Statute Chapter 50.065 does.legis.wisconsin.gov/statutes/statutes/50/I/065 and/or Wisconsin Administrative Code DHS Chapter 12 does.legis.wisconsin.gov/code/admin_code/dhs/001/12.pdf.	
Step 22	DHS	The IRIS Program Administrative Assistant receives the form, enters the required information into the DHS/Program Integrity SharePoint site, and assigns the case to the appropriate FEA representative. In addition, the IRIS Program Administrative Assistant scans and attaches the request form to the record in the DHS/Program Integrity SharePoint site. The status is "Appeal Received."	
Step 23	FEA	The FEA representative attaches the denial letter and original background check to the record in the DHS/Program Integrity SharePoint site and changes the status to "Pending Review."	
Step 24	DHS	Each Monday, the IRIS Section Staff review appeals received to ensure timely review. The composition of the committee varies based on staff availability. Upon identification of committee members for the week, the IRIS Program Administrative Assistant assigns the appropriate DHS/Program Integrity SharePoint record(s) with the status, "Pending Review," to the designated IRIS staff.	



Step 25	The designated IRIS Background Check Appeal Committee members review each background check appeal, examining the following information:  The relationship between the participant and participant-hired worker;  The conviction which caused the participant-hired worker's denial;  The type of services the participant-hired worker was to perform;  Whether the conviction substantially relates to the tasks the participant-hired would perform if hired, using Wisconsin Administrative Code DHS Chap  The participant-hired worker's statement of rehabilitation; and,  The reason the participant-hired worker's employment is important to the (participant's impact statement).		
Step 26	DHS	The designated IRIS Background Check Committee members render a decision, complete all required fields in SharePoint, and change the status to "Decision Issued."	
Step 27	DHS	The IRIS Program Administrative Assistant communicates the decision, in writing, to the participant, participant-hired worker applicant or participant-hired worker, ICA, and FEA.	
Step 28	DHS	The IRIS Program Administrative Assistant attaches the decision notification letters in the DHS/Program Integrity SharePoint site and changes the status to "Closed."	
Monitorii	ng		
Step 29	DHS, FEA	The FEA provides the DHS with data, annually, to confirm all participant-hired workers, hired during that calendar year, passed background checks prior to working with the participant.	
Step 30	DHS, FEA	The FEA provides the DHS with data, annually, to confirm all participant-hired workers, with a four year anniversary of date of hire, passed subsequent background checks.	
Step 31	DHS	The DHS utilizes the data provided by the FEA to report to the Centers for Medicare and Medicaid Services.	
Step 32	DHS, FEA	Data showing less than 100% compliance precipitates a Quality Improvement Project. FEAs and IRIS Consultant Agencies complete all Quality Improvement Projects as per IRIS Policy Manual Section 10.4 as well as in accordance with any further direction by the Department.	
Step 33	DHS	The DHS reviews data from the DHS/Program Integrity SharePoint site on a monthly basis.	

## **APPENDIX**

Participant-hired workers or participant-hired worker applicants convicted of any of the following crimes **cannot** be hired and paid with IRIS Medicaid Home and Community-Based Services Waiver funding.



Participant-hired workers and participant-hired worker applicants may *not* appeal crimes in **bold text** that are part of Wisconsin Statute 50.065 and/or Wisconsin Administrative Code Chapter 12 through the IRIS Background Check Appeal Request Process. Participant-hired workers and participant-hired worker applicants may appeal crimes **not** in bold text through the IRIS Program Appeal process described in Steps 20-28.

Participant-hired workers and participant-hired worker applicants are considered ineligible for employment if convicted of any of the following crimes related to **loss of life**:

- 940.01 First-degree Intentional Homicide
- 940.02 First-degree Reckless Homicide
- 940.03 Felony Murder
- 940.05 Second-degree Intentional Homicide
- 940.06 Second-degree Reckless Homicide
- 940.07 Homicide resulting from negligent control of vicious animal.
- 940.08 Homicide by negligent handling of dangerous weapon, explosives or fire.
- 940.09 Homicide by intoxicated use of vehicle or firearm.
- 940.10 Homicide by negligent operation of vehicle.
- 940.12 Assisting Suicide

Participant-hired workers and participant-hired worker applicants are considered ineligible for employment if convicted of any of the following crimes related to **physical harm to others:** 

# **940.19 (2), (3), (4), (5), (6)** – Battery; substantial battery; aggravated battery. *940.19 (2), (4), (5), (6) may not be appealed.*

- 940.195 Battery to an unborn child; substantial battery to an unborn child; aggravated battery to an unborn child
- 940.20 Battery: special circumstances
- 940.201 Battery or threat to witnesses
- 940.203 Battery or threat to judge
- 940.205 Battery or threat to Department of Revenue Employee
- 940.207 Battery or threat to Department of Safety and Professional Services or Department of Workforce

Development employee

- 940.208 Battery to certain employees of counties, cities, villages, or towns
- 940.21 Mayhem
- 940.23 Reckless injury
- 940.235 Strangulation and suffocation
- 940.24 Injury by negligent handling of dangerous weapon, explosives or fire
- 940.25 Injury by intoxicated use of a vehicle
- 940.285 Abuse of individuals at risk. 940.285 (2) is not appealable
- 940.29 Abuse of residents of penal facilities
- 940.295 Abuse and neglect of patients and residents
- 940.30 False imprisonment
- 940.302 Human trafficking
- 940.305 Taking hostages
- 940.31 Kidnapping
- 940.32 Stalking

Participant-hired workers and participant-hired worker applicants are considered ineligible for employment if convicted of any of the following crimes related to **sexual harm of others**:



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940.22 – Sexual exploitation by therapist; duty to report. 940.22 (2) and (3) are not appealable.

**940.225** – **Sexual assault 940.225** (1). (2), or (3) are <u>not</u> appealable.

Applicants are considered ineligible for employment as participant-hired workers if convicted of any of the following **crimes against property:** 

943.02 – Arson of buildings; damage of property by explosives.

943.10 - Burglary.

943.20 - Theft.

943.201 – Unauthorized use of an individual's personal identifying information or documents.

943.203 – Unauthorized use of an entity's identifying information or documents.

943.32 - Robbery

943.38 - Forgery

943.395 – Fraudulent insurance and employee benefit program claims

943.41 - Financial transaction card crimes

943.81 – Theft from a financial institution

943.82 – Fraud against a financial institution

943.83 - Loan fraud

943.85 – Bribery involving a financial institution

943.86 – Extortion against a financial institution

943.87 – Robbery of a financial institution

943.88 – Organizer of financial crimes

943.89 – Mail fraud

943.90 – Wire fraud against a financial institution

49.49 - Medicaid or Public Assistance Fraud

Participant-hired workers and participant-hired worker applicants are considered ineligible for employment if convicted of any of the following crimes related to **crimes against children**:

**948.02** – **Sexual assault of a child.** *948.02* (1) and (2) is not appealable

948.025 - Engaging in repeated acts of sexual assault of the same child

**948.03 – Physical abuse of a child.** *948.03 (2)(a), (b), or (c) are not appealable* 

948.04 – Causing mental harm to a child

948.05 – Sexual exploitation of a child

948.051 - Trafficking of a child

948.055 – Causing a child to view or listen to sexual activity

948.06 – Incest with a child

948.07 - Child enticement

948.075 – Use of a computer to facilitate a child sex crime

948.08 - Soliciting a child for prostitution

948.085 – Sexual assault of a child placed in substitute care

948.09 – Sexual intercourse with a child age 16 or older

948.095 – Sexual assault of a child by a school staff person or a person who works or volunteers with children

**948.11** – Exposing a child to harmful material or harmful description or narrations 948.11 (a) and (am) are not appealable

948.12 – Possession of child pornography

948.13 - Child sex offender working with children

948.14 – Registered sex offender and photographing minors

948.20 – Abandonment of a child



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**948.21** – **Neglecting a child.** *948.21 (1) is not appealable* 

948.23 – Concealing or not reporting death of a child; not reporting disappearance of a child

948.30 - Abduction of another's child; constructive custody

948.53 – Child unattended in child care vehicle

Participant-hired workers and participant-hired worker applicants are considered ineligible for employment if convicted of any of the following crimes under the **Uniform Controlled Substances Act:** 

961.41 (1) – Manufacture, Distribution or Delivery

961.41 (1m) - Possession with intent to manufacture, distribute, or deliver

961.41 (3g) - Possession or attempt to possess a controlled substance analog

961.42 – Maintaining a drug trafficking dwelling

961.43 (1) (a) – Acquire or obtain possession of a controlled substance by misrepresentation, fraud, forgery, deception or subterfuge

961.43 (1) (b) – To make, distribute or possess material designed to reproduce the trademark upon any drug or container or label so as to make a counterfeit substance or to duplicate the physical appearance, form, package or label of a controlled substance

961.453 – Purchases of pseudoephedrine products on behalf of another person

961.455 – Using a child for illegal drug distribution or manufacturing purposes

961.46 – Distribution to persons under age 18

961.49 – Offenses involving intent to deliver or distribute a controlled substance on

or near certain places

961.495 – Possession or attempted possession on or near certain places

# **Chapter 10: Program Integrity**

# 10.1A.1 Fraud Allegation Review and Assessment (FARA)

#### **Business Rules**

- 1. IRIS Consultant Agencies (ICAs) are responsible for training participants on the principles of identifying and mitigating fraud using the document, "Participant Education: Program Integrity Fraud Prevention." This document and corresponding education must be provided to IRIS participants at the time of orientation, annually, and each time allegations of fraud occur. "Orientation" is defined as the 90 days period following the date of referral.
- 2. The ICAs are responsible for educating participant-hired workers on appropriate completion of timesheets and educating participants regarding employer responsibilities.
- 3. The ICAs and Fiscal/Employer Agents (FEAs) are responsible for ensuring all ICA and FEA employees are trained and competent in the areas of fraud identification, prevention, and mitigation, via a Department of Health Services (DHS) developed and/or approved curriculum.



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- 4. The FEAs are responsible for monitoring timesheets and participant-hired worker employee packets for indications of fraud.
- 5. The FEAs are responsible for implementing and maintaining a fraud monitoring system.
- 6. The ICAs and FEAs are responsible for collaborating to complete the Fraud Allegation Review and Assessment (FARA) process for participants choosing those respective agencies.
- 7. The FARA team consists of the DHS FARA representative(s), the ICA FARA representative(s) from the participant's chosen ICA, and the FEA FARA representative(s) from the participant's chosen FEA. (The "participant" referenced in this business rule refers to the IRIS participant for whom the allegations of fraud exist.)
- 8. The FARA team systematically collects information regarding the reported allegation(s), ensures the health and welfare of the participant, determines whether a reasonable person would determine that fraud/waste/abuse is present, and ensures the identified fraud/waste/abuse is mitigated.
- 9. The FARA team reports cases resulting in substantiated fraud to the Office of the Inspector General (OIG). The OIG utilizes the FARA to determine if there is a "sufficient cause for Department of Justice investigation." When appropriate, the DHS FARA representative and OIG will work together to prepare the referral of the allegation to the Department of Justice (DOJ).
- 10. The DOJ maintains investigative authority regarding fraud, evaluates the facts submitted by the FARA team and responds and investigates as per DOJ Policy.
- 11. The FARA team's review period from referral to resolution, not including referrals to the DHS, OIG, and/or DOJ, will not exceed 30 days.
- 12. Any time an individual allegedly commits fraud, also known as "FARA subject," provides services and/or has access to additional IRIS participants' funds, the ICA and FEA FARA Team representatives conduct a related review of other transactions to determine the need to open companion cases.
- 13. The FARA must include the following activities:
  - Review of FEA records of the participant and providers;
  - Review of ICA records;
  - Allegation-related interviews of each involved party FARA subjects should only be interviewed in cases that appear to be unsubstantiated or abuse after an audit of related FEA and ICA records;
  - DHS/Program Integrity SharePoint site documentation of all fact-finding activities;
  - DHS/Program Integrity SharePoint site attachment of relevant documents obtained during the FARA process;
  - Implementation of appropriate mitigation strategies based on identified FARA outcome;



- A resolution description all fact-finding activities, information collected, FARA determination, and mitigation strategy determination; and
- Identification, documentation, and mitigation of any concerns regarding participant health and welfare.
- 14. **Fraud** refers to "any intentional deception made for personal gain or to damage another individual, group, or entity. It includes any act that constitutes fraud under applicable Federal or State law. Examples include, but are not limited to:
  - Falsification of provider credentials;
  - Falsification of participant needs;
  - Falsification of participant assets, income, or any information used in determination of eligibility;
  - Intentionally performing or billing services improperly, including false claims, or intentionally denying appropriate services.

Fraud is **knowingly** and **willfully** executing, or attempting to execute, a scheme or artifice to defraud any health care benefit program or to obtain, by means of false or fraudulent pretenses, representation, or promises, any of the money or property owned by, or under the custody of control of, any health care benefit program (18 U.S.C. 1347)."

- 15. *Unsubstantiated Fraud* refers to fraud allegations unsupported by the facts collected during the FARA.
- 16. *Abuse* refers to FARA cases wherein facts supporting the allegations of fraudulent activity were found, but no facts indicate that the FARA subject knowingly and willfully committed the fraudulent activity.
- 17. *Substantiated Fraud* refers to cases wherein by the facts collected during the FARA supported the fraud allegations *and* facts indicate that the FARA subject knowingly and willfully committed the fraudulent activity.
- 18. For any type of fraud allegation, the following activities may be completed to mitigate the issues identified during the FARA process, and commensurate with the outcome of the FARA taking into consideration other factors including but not limited to number of previous cases, outcomes of previous cases, and budget utilization patterns.

All types of fraud allegations	Unsubstantiated	<ul> <li>Educate and Monitor</li> <li>Flagged in Payroll System</li> <li>Increased Monitoring</li> <li>Payment Issued</li> </ul>
	Abuse	<ul> <li>Amended Level of Support (for future use)</li> <li>Changed Agency that Provides Service</li> <li>Changed Personnel Working with Participant</li> <li>New Timesheet</li> <li>Payment Modified</li> <li>Payment Withheld</li> <li>Reduction in Service</li> <li>Stop Payment on Issued Funds</li> </ul>



	Terminated Service
Substantiated	Disenrollment – Involuntary
	<ul> <li>IRIS Exclusion List (for future use)</li> </ul>
	Mandate Agency
	<ul> <li>Mandate Support Broker</li> </ul>
	<ul> <li>Recoupment of Funds (DHS Collections)</li> </ul>
	Reduction in Service
	Refer to DHS

- For allegations that were considered unsubstantiated for fraud and were not considered "Abuse," the FARA team will select mitigation activities from the "Unsubstantiated" section.
- For allegations considered "Abuse," the FARA team will select mitigation activities from the "Unsubstantiated Fraud" or "Abuse" sections.
- For allegations considered "Substantiated," the FARA team will select mitigation activities from the "Unsubstantiated," "Abuse," or "Substantiated" sections.
- 19. The DHS has the authority to disenroll participants identified as the FARA subject in substantiated FARA cases due to misappropriation of funds.
- 20. The DHS *automatically* disenrolls all IRIS participants identified as the FARA subject in FARA cases accepted by the DOJ for investigation due to misappropriation of funds.
- 21. Participants disenrolled from the IRIS program under the conditions outlined in Business Rule #20 may re-enroll in the IRIS program following the closure of their DOJ investigation when the determination result is unsubstantiated.

### **Identifying and Reporting Process**

Step #	Responsible Partner(s)	Detail	
Step 1	Party who identified fraud, ICA, FEA	The party (e.g. participant, guardian, provider, consultant) identifying the potential fraud notifies the ICA or FEA and reports the allegations within one business day of discovery. The provider agency staff receiving the report transfers the reported information, immediately, to the receiving agency's Fraud Allegation Review and Assessment (FARA) representative.	
Step 2	ICA, FEA	The ICA or FEA FARA representative documents the report of potential fraud in the DHS/Program Integrity SharePoint site within one business day of initial fraud notification. The one business day timeframe encompasses the tasks identified in Steps 2-4. The required fields in the DHS/Program Integrity SharePoint site include "Participant's Name," "MCI," "Participant's Contact Information," "County," "IC," "IC Supervisor," "Target Group," "Date Reported," "Reported Fraud Type," "Fraud Allegation," "Estimated Fraud Amount," "FARA Subject," "FARA Subject's Contact Information," "FARA Subject Relationship," "Is the FARA Subject the Guardian?," "Referral Source," "Referral Source Contact Information," "Relationship of Referral Source," "Health/Welfare Concerns," and "Health/Welfare Specific Concern(s)."	



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Step 3	ICA, FEA	The FARA representative receiving the report co-assigns the FARA representative from the other agency. For example, if the FARA representative from the ICA receives the report of fraud allegations, they co-assign the FARA representative from the FEA. The FARA representative captures the co-assignment in the "Assigned To" field in the DHS/Program Integrity SharePoint site.		
Step 4	ICA, FEA	The FARA representatives report all cases, regardless of FARA involvement, to the OIG via the OIG portal: <a href="http://www.dhs.wisconsin.gov/fraud/">http://www.dhs.wisconsin.gov/fraud/</a> . The party entering the case into the DHS/Program Integrity SharePoint site also makes the OIG referral via the portal. The FARA representative enters the date of the referral to OIG in the "Date Entered into OIG Portal" field in the DHS/Program Integrity SharePoint site.		
Step 5	ICA, FEA	<ul> <li>The FARA representatives from the ICA and FEA evaluate the information presented in the referral and the information available in the participant's record and collaboratively determine whether the case is opened for FARA. After all FARA avenues (see Steps 5-8) are exhausted, the case is closed without conducting a FARA if the following conditions exist: <ul> <li>The allegation is extortion, meaning the participant is requiring the employee to give the participant a portion of their check for legitimate hours worked.</li> <li>Insufficient information existed to continue pursuit of the allegation.</li> <li>The manner in which the IRIS program operates renders occurrence of the allegation impossible.</li> <li>The allegation is theft, exclusive of the participant's IRIS funds or materials purchased by the IRIS program for the participant but with focus on the participant's personal property such as medications and personal funds.</li> </ul> </li> <li>FARA representatives must determine within three business days of receiving the report whether the case is opened.</li> </ul>		
Fraud Allegation Review and Assessment Process				
Step 6	FEA, ICA	FARA representatives from the ICA and the FEA collaborate to review the participant's record and attach all pertinent documentation – timesheets, budget reports, employee packets, etc. –to the FARA record in the DHS/Program Integrity SharePoint site. The FEA FARA representative enters a narrative analysis of the FEA documentation in the "Documented Contacts" section. The FARA representative from the ICA reviews the participant's record and attaches all pertinent documentation – case notes, plans, etc. – to the FARA record in the DHS/Program Integrity SharePoint site. The ICA FARA representative enters a narrative analysis of the documentation in the "Documented Contacts" section.		



Step 7	ICA, FEA	The FARA representatives from the ICA and the FEA obtain information from all known individuals with knowledge regarding the fraud allegation and enter a detailed account of each contact in the "Documented Contacts" section of the fraud allegation review and assessment record in the DHS/Program Integrity SharePoint site. All documented contacts must include names; the role of the contacted individual; date of the contact; information obtained; and, any action items resulting from the contact. FARA representatives interview FARA subjects when the information collected through interviews with other involved parties and completion of the activities in Step 6 indicate the outcome will likely be "Fraud Unsubstantiated" or "Abuse." The FARA representative conducting the interview with the FARA subject should stop the interview immediately if the FARA subject provides information indicative of their intent to commit fraud.
Step 8	ICA	Upon receiving a report of health and safety issues as part of the FARA allegations, the FARA representative from the ICA ensures the participant's IRIS Consultant addresses these issues during the FARA process to ensure the immediate and ongoing health and welfare of the participant is secured. This information is documented in the DHS/Program Integrity SharePoint in fields: <ul> <li>"Health and Welfare Concerns"</li> <li>"Health and Welfare Specific Concern(s)"</li> <li>"Health and Welfare Referral"</li> <li>"Critical Incident Report"</li> </ul>

# **Mitigation of Fraud/Abuse**

Step 9	ICA, FEA	When FARA cases do not meet the criteria for referral to DHS as defined in Step 14, the FARA Team determines whether the allegation is: substantiated (facts indicative of fraudulent activity and intent are BOTH present); abuse (facts indicative of fraudulent activity are present, but facts indicative of intent are NOT present); unsubstantiated (no facts indicative of fraudulent activity are present), or insufficient information exists to make a determination. The FARA representatives denote the FARA outcome in the "FARA Outcome" field the DHS/Program Integrity SharePoint site.
Step 10	ICA, FEA	The FARA Team identifies steps to prevent the occurrence of subsequent fraudulent activity and documents the mitigation activities in the following sections of the DHS/Program Integrity SharePoint site: "Mitigation Strategies," and "Resolution." The "Resolution" section must include a detailed FARA summary including a synopsis of all information-gathering activities, the outcome, and cause for the determination of the FARA, and the mitigation strategies including cause for recommendation.
Step 11	ICA, FEA	The FARA Team communicates the next steps to the appropriate ICA and/or FEA staff to execute the identified mitigation strategies. The FARA Team monitors implemented mitigation activities to ensure the steps outlined in the resolution section in the DHS/Program Integrity SharePoint site are completed.
Step 12	ICA, FEA	The FARA team includes the mitigation strategies in the "Resolution" field in the DHS/Program Integrity SharePoint site. Upon completion and implementation of the mitigation strategies, the FARA team enters a statement in the "Resolution" field documenting the date of completion and changes the status to "DHS – Review." The FARA team assigns the case to the DHS FARA representative to trigger a review of the FARA case in the DHS/Program Integrity SharePoint site.



Step 13	ICA, FEA	FARA representatives from the ICA and FEA complete all information-gathering activities detailed in Steps 6-8 and the decision-making and mitigation steps detailed in Step 9-12 within 30 days.
Referral t	to the Departn	nent of Health Services
Step 14	ICA, FEA	A DHS referral is made via the DHS/Program Integrity SharePoint site in cases where the FARA meets the following criteria,:  • FARA Team determines a referral to OIG is appropriate  • FARA Team determines a referral to the DOJ is appropriate  • FARA Team recommends the following actions  • Amended Level of Support (for future use)  • Involuntary Disenrollment  • Exclusion List (for future use)  • Mandated Agency  • Mandated Broker  • Recoupment of Funds  • Reduction in Services  • Referral to Law Enforcement  • Termination of Service  • FARA Team is unable to make a determination  • FARA Team is unable to make a mitigation recommendation  (The FARA Team assigns the case to the DHS FARA Team representative, enters the date of DHS referral, and changes the status to "Open – DHS" in the DHS/Program Integrity SharePoint site.)
Step 15	DHS	DHS serves as the decision-making authority regarding referrals to OIG or DOJ for investigation and as the approving authority regarding mitigation strategies specified in Step 14 as proposed by the FARA Team. DHS leads problem solving in complex cases.
Step 16	DHS	Upon notification of the assignment of the FARA case, the DHS FARA representative reviews the FARA case in advance of the next scheduled Program Integrity meeting (see Step 39). If the case requires immediate action, the DHS FARA representative schedules a separate meeting to assist the FARA Team in resolving the issue.
Step 17	DHS, ICA, FEA	During the Program Integrity meeting, DHS advises the FARA Team on issue resolution. The FARA Team responds to ensure appropriate referrals occur and the mitigation strategies are implemented. The DHS FARA representative enters a summary of the conversation and stated directives in the DHS/Program Integrity SharePoint record.



Step 18	ICA	Upon completion of the FARA and mitigation strategies, the FARA team changes the status in the DHS/Program Integrity SharePoint site to "DHS – Review" to trigger the DHS FARA representative to review the FARA record. In situations where the FARA is not completed within 30 days, the FARA team provides an explanation using the fields, "If Yes, why?" and "Explanation" in the DHS/Program Integrity SharePoint site. The DHS FARA representative rejects/approves the explanation using the fields, "Reason Accepted by DHS" and "If No, Why?" Generally speaking, DHS accepts explanations that are outside of the FARA team's control (e.g. participant will not make themselves available) while explanations describing the ICA's or FEA's inability to manage within the prescribed process are not accepted.
Referral t	to the Office of	f the Inspector General/Department of Justice
Step 19	DHS	The DHS FARA representative authorizes the OIG referral, which assists in referring the case to the DOJ, when the following criteria are met:  • Detailed facts exist, indicative that the allegation of fraud has occurred; <b>AND</b> • Facts exist indicative of <b>intent</b> to defraud the program.
Step 20	DHS	The DHS FARA representative conducts a final review of the FARA record in the DHS/Program Integrity SharePoint site to ensure that all required information is present.
Step 21	DHS, OIG	Upon the DHS FARA representative approval of an OIG/DOJ referral, the DHS FARA representative makes the appropriate contacts within OIG to have the FARA record screened for DOJ referral. The DHS FARA representative changes the status in the DHS/Program Integrity SharePoint site to "Open – OIG."
Step 22	OIG	OIG conducts a review of the FARA record and makes a determination regarding referral activity to DOJ or recommends another course of action. OIG's determination includes whether the information collected during the FARA presents a "sufficient cause for DOJ investigation." (See OIG policy.)
Step 23	DHS	The DHS FARA representative enters OIG's recommendations in the DHS/Program Integrity SharePoint site in the following fields:  • "Documented Contacts"  • "Mitigation Strategies" and/or  • "Resolution"
Step 24	DHS	The DHS FARA representative monitors the FARA records referred to OIG and serves as the liaison between the FARA process and OIG.
Step 25	DHS	The DHS FARA representative changes the status in the DHS/Program Integrity SharePoint site to "closed" after OIG provides a recommendation to DHS. Only DHS can change the status in the DHS/Program Integrity SharePoint site to "Closed."
Referral t	o Department	of Justice
Step 26	DHS/OIG	The DHS FARA representative forwards all appropriate cases to the DOJ as guided by the OIG after ensuring the packet of information is sufficient to meet the requirements of DOJ.
Step 27	DHS	The DHS FARA representative changes the status in the DHS/Program Integrity SharePoint site to "Open – DOJ."
Step 28	DHS	The DHS FARA representative monitors the FARA record(s) referred to DOJ and serves as the liaison between the FARA process and DOJ.
Step 26 Step 27	DHS/OIG DHS	The DHS FARA representative forwards all appropriate cases to the DOJ as guided by the OIG after ensuring the packet of information is sufficient to meet the requirements of DOJ.  The DHS FARA representative changes the status in the DHS/Program Integrity SharePoint site to "Open – DOJ."  The DHS FARA representative monitors the FARA record(s) referred to DOJ and serves as



Step 29	DHS	The DHS FARA representative changes the status in the DHS/Program Integrity SharePoint site to "closed" after DOJ provides a recommendation to DHS. Only DHS can change the status in the DHS/Program Integrity SharePoint site to "closed."
Pursuing	Recoupment	
Step 30	ICA	The ICA FARA representative prepares a single page summary of the IRIS funds received by the individual through fraudulent means as evidenced by the FARA's fact-finding activities and subsequent documentation thereof using information from the FARA case in the DHS/Program Integrity SharePoint site. This document is the FARA Summary for Recoupment.
Step 31	ICA	The ICA FARA representative completes referral form ( <u>F-80921</u> ) and attaches the Summary for Recoupment.
Step 32	ICA	The ICA FARA representative forwards the completed F-80921 and the FARA Summary for Recoupment to the DHS FARA representative by attaching the documents into the FARA record in the DHS/Program Integrity SharePoint site and assigning the case to the DHS FARA representative.
Step 33	DHS	The DHS FARA representative reviews and approves the F-80921 and FARA Summary for Recoupment attached in the DHS Program Integrity SharePoint site.
Step 34	DHS	The DHS FARA representative forwards the approved Form F-80921 to DHS/DES/BFS for processing and changes the status to "Closed" in the DHS Program Integrity SharePoint site.
Step 35	DHS/DES/ BFS	DHS/Division of Enterprise Services (DES)/Bureau of Fiscal Services (BFS) provides individuals written notice that they have up to 90 days to pay the delinquency in full or they may be referred to Department of Revenue (DOR) Collections.
Step 36	DOR	DOR adds a collection fee to the delinquency and attempts to collect the debt.
Monitori	ng	
Step 37	DHS	The DHS FARA representative reviews and approves all fraud allegation review and assessment records in the DHS/Program Integrity SharePoint site in accordance with the document, "Criteria for Closing a Fraud Allegation Review and Assessment (FARA)." The DHS FARA representative captures this information in the "DHS Approval" and "Date FARA Closed by DHS" fields in the DHS/Program Integrity SharePoint site.
Step 38	DHS	The DHS FARA representative utilizes the "DHS Requested Follow Up" and "Follow Up Due Date" fields to communicate requests for additional information/action to the appropriate agency and assigns either the FEA FARA representative or ICA FARA representative to complete the follow up. The DHS FARA representative changes the status back to "Open – ICA" or "Open – FEA" depending on which agency needs to complete the work.
Step 39	ICA, FEA	The assigned FEA FARA representative or ICA FARA representative provides a narrative of the mitigation activities to respond to the DHS FARA representative's request for additional action/information in the "DHS Requested Follow Up" section. The FARA team has five business days to respond to all requests for follow up actions/information and the DHS FARA representative prescribes a due date in the "Follow Up Due Date" field in the DHS/Program Integrity SharePoint site. The FARA team changes the status to "DHS-Review."



Step 40	DHS	Upon DHS FARA representative approval of a FARA case, the DHS FARA representative completes the DHS/Program Integrity SharePoint site fields, "DHS Approval" and "Date FARA Closed by DHS." The DHS FARA representative changes the status to "Closed" in the DHS/Program Integrity SharePoint site. Only the DHS FARA representative can change the status to "Closed."
Step 41	DHS	The DHS FARA representative reviews the monthly data, quarterly reports, and annual reports for trends and systems issues.
Step 42	DHS, ICA, FEA	At the request, and under the instruction of the DHS FARA representative, the ICAs and FEAs engage in quality improvement projects related to the data obtained via the SharePoint system. The DHS FARA representative ensures the ICA and FEA providers complete all quality improvement projects as instructed by DHS.

### **Data/Narrative Reporting**

Step 43	ICA	On a monthly basis, the DHS FARA representative pulls data according to the "Program Integrity Monthly Data Requirements" document. DHS makes this data available to FARA team members by the 15 <sup>th</sup> of the following month on the DHS/Program Integrity SharePoint site.
Step 44	ICA, FEA, DHS	The FARA Team meets monthly to review active cases requiring DHS involvement, review the data, and discuss any process issues.
Step 45	ICA	Each ICA prepares reports, on a quarterly basis, as instructed in the "Program Integrity Quarterly Narrative Report Outline."
Step 46	ICA	Each ICA prepares reports, on an annual basis, as instructed in the "Program Integrity Annual Narrative Report Outline."
Step 47	DHS	The DHS FARA representative reviews and approves all quarterly and annual narrative reports.
Step 48	DHS	The DHS FARA representative prepares annual reports providing comparative data.

# **10.3A.1 Conflict of Interest – Participant**

# **Business Rules**

- 1. IRIS Consultant Agencies (ICAs) maintain responsibility to train participants and staff on the identification and resolution of conflict of interest utilizing the document, "Participant Education: Program Integrity Conflict of Interest." This document and corresponding education must be provided to IRIS participants each time a conflict of interest is identified, at the time of orientation, and annually. The Department of Health Services (DHS) defines "orientation" as the 90-day period following the date of referral.
- 2. ICAs maintain responsibility for identifying, resolving, and monitoring conflicts of interest.
- 3. All conflicts of interest must be resolved, or sufficiently addressed, to ensure compliance with IRIS policy.
- 4. ICAs maintain responsibility to document all conflicts of interest.
- 5. ICAs maintain responsibility for facilitating the resolution of conflicts of interest.



- 6. Legal representatives may provide up to 40 hours of any combination of Supportive Home Care (SHC), Daily Living Skills, and IRIS Self-Directed Personal Care (IRIS SDPC), or receive up to 75 percent of the IRIS participant's budget in earnings (whichever comes first) without it being considered a conflict of interest.
- 7. Support brokers may not provide any other paid support or service to the participant.
- 8. Legal representatives may only provide IRIS SDPC, Respite, Daily Living Skills Training, Supported Employment, Nursing Services, 1-2 Bed Adult Family Home, Customized Goods and Services, Specialized Transportation, Specialized Transportation 2, and Supportive Home Care per the approved 1915(c) Medicaid Home and Community-Based Services Waiver and IRIS Service Definition and Code Manual.
- 9. IRIS Consultants (ICs), ICA Staff, and Fiscal Employer Agent (FEA) Staff may not receive IRIS funds for providing Medicaid Waiver services to the IRIS participants supported as an IC, ICA Staff, or FEA Staff. For example, an IC may not serve as a consultant and an SHC worker for the same participant. However, an IC may serve as a SHC worker for an IRIS participant for whom they do not also provide consulting services.
- 10. ICs, ICA Staff, and FEA Staff may not benefit directly or indirectly, financially or otherwise, from the service providers chosen by the IRIS Participant they support.

### **Identification and Reporting of a Conflict of Interest**

Step #	Responsible Partner(s)	Detail
Step 1	IC, ICA, DHS, FEA, Participant, Other	The individual discovering the conflict of interest notifies the IC of the conflict of interest.
Step 2	IC	The IRIS Consultant documents the identification of the conflict of interest using the Conflict of Interest – Participant form ( $\underline{F-01310A}$ ).
Investigat	tion Process	
Step 3	IC	The IC explains to the IRIS participant and/or legal representative that a conflict of interest exists and identifies the specific conflict of interest.
Step 4	IC, Participant, Legal Rep.	The IC reviews the document, "Participant Education: Program Integrity – Conflict of Interest" with the IRIS participant and/or legal representative.
Step 5	IC, Participant, Legal Rep.	The IC collects information regarding the conflict of interest from the IRIS participant and/or legal representative.
Resolutio	n Process	
Step 6	IC	The IC and the IRIS participant and/or legal representative collaborate to identify at least two viable options of resolution strategies to resolve the conflict of interest. All presented strategies must comply with the IRIS Policy Manual.



Step 7	Participant, Legal Rep.	The IRIS participant and/or legal representative choose one or more of the identified resolution strategies. The IC and/or ICA will determine if the proposed resolution strategies sufficiently resolve the conflict of interest and remain in compliance with IRIS policy.
Step 8	IC, Participant, Legal Rep.	The IC, IRIS participant, and/or legal representative collaborate to strategize and develop an implementation and monitoring plan including timeframes.
Step 9	IC	The IC completes the "resolution strategies," "implementation plans," and "monitoring fields" on the Conflict of Interest – Participant form (F-01310A).

### **Implementation Process**

Step 10	IC, Participant, Legal Rep.	The IC, IRIS participant, and/or legal representative collaborate to implement the resolution strategies and timeframes.
Step 11	IC	The IC adheres to the monitoring plan and schedule and continues to document all information relative to the conflict of interest resolution in the data system under the contact type, "Conflict of Interest."

#### **Monitoring**

	0	
Step 12	DHS	DHS monitors the conflict of interest process through the record review process.
Step 13	ICA	The ICA provides the Department with quarterly data regarding participant conflict of interest on the following elements:  • Number of conflicts of interest identified;  • Type of conflicts of interest;  • Action(s) taken; and  • Number/Percent resolved
Step 14	DHS, ICA	DHS and the ICA review the data during monthly quality management meetings.
Step 15	DHS, ICA, FEA	At the request and instruction of DHS, and under the instruction of DHS, the ICA engages in quality improvement projects related to the data collected. DHS ensures the ICA and FEA providers complete all quality improvement projects as instructed.

#### 10.3A.2 Conflict of Interest – Provider

### **Business Rules**

- 1. IRIS Consultants (ICs), IRIS Consultant Agency (ICA) Staff, and Fiscal Employer Agent (FEA) Staff may not benefit directly, or indirectly, financially or otherwise, from the service providers chosen by the IRIS Participants they support.
- 2. ICA and FEA providers must ensure all employees receive training to include principals regarding the identification of potential conflicts of interest and the risk mitigation protocol for any identified conflicts of interest.
- 3. ICA and FEA providers must maintain signed documentation of each employee's receipt, and understanding of, the DHS' conflict of interest policy.



- 4. ICAs and FEAs must disclose if an employee or a member of an employee's immediate family owns or controls a 10 percent interest or greater or receives payment of more than \$3,000 within a 12-month period from any provider of Wisconsin Medicaid services in any Wisconsin Medicaid program.
- 5. All employees of all ICAs and all FEAs must identify whether a conflict of interest exists using the Conflict of Interest Disclosure Provider form (F-01310). Annual employee completion of this form is required.
- 6. The Conflict of Interest Disclosure form includes the following information:
  - a. The employee's name and contact information;
  - b. The employee's position within the ICA or FEA;
  - c. The ICA or FEA provider's information;
  - d. The Wisconsin Medicaid provider's information;
  - e. The percentage of control and/or payment received within a 12- month period; and,
  - f. The mitigation strategies in place to prevent a conflict of interest.
- 7. All conflicts of interest must be resolved, or sufficiently addressed, to ensure compliance with IRIS policy.
- 8. The Department of Health Services (DHS) reviews the Conflict of Interest Disclosure form, applies it against the IRIS Conflict of Interest policy, and makes a determination regarding whether the employee sufficiently mitigated any documented conflict of interest.
- 9. The DHS issues statements to ICA and FEA providers communicating any insufficient mitigation of employee conflicts of interest. The ICA and FEA providers must address the actions required in the form of a Conditional Certification Improvement Plan (CCIP) as described in IRIS Work Instruction Manual Section 10.4.
- 10. ICs, ICA Staff, and FEA Staff may not receive IRIS funds for providing Medicaid Waiver services to the IRIS participants they support in their role as an IC, ICA Staff, or FEA Staff. For example, an IC may not serve as a consultant and a Supportive Home Care (SHC) worker for the same participant. However, an IC may serve as an SHC worker for an IRIS participant for whom the IC does not also provide consulting services.
- 11. ICAs may not provide any other direct services to participants with an approved Individual Service and Support Plan (ISSP)/budget and actively receiving services in the IRIS program. For example, ICAs cannot also operate a Supportive Home Care (SHC) agency.
- 12. ICAs may not employ, as an IC or Long Term Care Functional Screener, any immediate family member or guardian of a participant in the IRIS program to directly serve the participant.

#### **Completion of the Conflict of Interest Disclosure Form**

Step #	Responsible Partner(s)	Detail
Step 1	ICA employees,	All employees of ICA and FEA providers complete the Conflict of Interest Disclosure – Provider form (F-01310) at the time of hire and annually, thereafter.



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	FEA	
	employees	
Conflict o	f Interest Miti	gation Process
Step 2	ICA, FEA	The ICAs and FEAs assist employees with identifying a mitigation strategy that complies with all IRIS policies and requirements.
Step 3	DHS	DHS reviews and approves all Conflict of Interest Disclosure forms.
Step 4	ICA, FEA	The ICAs and FEAs ensure employee compliance with specified mitigation strategies.
Monitorii	ng	
Step 5	ICA, FEA	The ICAs and FEAs monitor the employee's compliance with specified mitigation strategies as described in each individual agency's policy manual.
Step 6	ICA, FEA	The ICAs and FEAs provide DHS with quarterly data regarding participant conflict of interest regarding the following elements:  • Number of conflicts of interest identified;  • Types of conflicts of interest;  • Action(s) taken; and,  • Number/Percent resolved.
Step 7	DHS, ICA, FEA	DHS reviews the data with ICAs and FEAs during monthly quality management meetings.
Step 8	DHS, ICA, FEA	At the request, and under the instruction of DHS, the ICAs engage in quality improvement projects related to the data collected. DHS ensures the ICA and FEA providers complete all quality improvement projects as instructed.

#### 10.3A.3 IRIS Self-Directed Personal Care Disclosure Statement

#### **Business Rules**

- 1. The Management Group (TMG) operates two, separate lines of business providing services to IRIS participants: an IRIS Consultant Agency (ICA) and the IRIS Self-Directed Personal Care (SDPC) Oversight Agency. These work instructions apply only to the TMG-ICA.
- The Department of Health Services (DHS) uses the IRIS Self-Directed Personal Care (SDPC) Disclosure Statement (<u>F-01258</u>) as one method of mitigating actual, or perceived, conflict of interest between TMG's separate lines of business.
- 3. DHS defines "Personal care-related discussions" as any discussion wherein the participant requests information about personal care; the participant inquires about eligibility for personal care; the participant requests clarification of the difference between IRIS SDPC and Medical Assistance Personal Care (MAPC); and, other related conversations.

## Form Implementation

Step #	Responsible Partner(s)	Detail
Step 1	TMG-ICA	The TMG's ICA must review the IRIS SDPC Disclosure Statement with participants receiving ICA services from TMG, at the onset of personal care-related discussions and



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		annually, thereafter, for TMG-ICA participants receiving IRIS SDPC services.
Step 2	IRIS Consultant (IC)	The IC attaches the signed IRIS SDPC Disclosure Statement to the participant's record, in the IT system.
Monitorii	ng	
Step 3	DHS	DHS reviews participant records to ensure the records contain a current, signed IRIS SDPC Disclosure Statement. "Current" is defined as being signed by the participant within the last 365 calendar days.
Step 4	DHS	DHS communicates negative findings including instructions for remediation to the TMG-ICA.
Step 5	IC	The IC reviews the IRIS SDPC Disclosure Statement with the participant, obtains the participant's signature, and attaches the form to the participant's record.
Step 6	TMG-ICA	The TMG-ICA provides DHS with a response to the requested remediation.
Step 7	DHS	DHS confirms the presence of a current, signed IRIS SDPC Disclosure Statement in the participant's record and closes the remediation request.
Step 8	DHS, IC, TMG-ICA	Steps 6 and 7 recur until DHS is satisfied with the TMG-ICA's remediation response and closes the remediation request.
Step 9	DHS TMG-ICA	Upon the identification of a system issue, DHS can require that TMG-ICA complete a quality improvement plan to address the system issue. The TMG-ICA completes quality improvement plans following the steps in Work Instruction Manual Section 10.4B.1.

# **Chapter 11: Appeals and Grievances**

# **11.1A.1** Appeals

#### **Business Rules**

- IRIS Consultant Agencies (ICAs) are responsible for training participants on the appeals process including
  Notices of Action (NOA) using the document, "IRIS Participant Education Notices of Action and Appeals (F01205G)." This document and corresponding education must be provided to IRIS participants at the time of
  orientation and annually thereafter. ICAs are responsible for attaching the signed forms to each participant's
  record.
- 2. Denials, limits, reductions, and terminations in IRIS services require the participant's IRIS Consultant Agency to send an NOA to the participant to provide notice of the action taken and an explanation of the decision.
- 3. Notices of Action include information about the Division of Hearings and Appeals (DHA) appeals process including information about requesting a continuation of services pending an appeal outcome.
- 4. IRIS participants must request an appeal within 45 days of the date on the NOA by sending written notification to DHA as indicated in the appeals information mailed with the NOA.
- 5. MetaStar conducts a "concurrent review," as contracted by DHS, for each participant for whom DHA accepts a request for appeal. Concurrent reviews consist of MetaStar reviewing the participant's paperwork and conferring with the participant's ICA and/or the Department of Health Services (DHS) to resolve the issue and eliminate the need for an appeal. Participants may opt out of this service.
- 6. IRIS participants also have the option of working directly with their ICA, DHS, or Disability Rights Wisconsin (DRW) (ombudsman for participants ages 18-59) to resolve the issue in advance of a DHA hearing.



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- 7. Negotiations with ICAs, DRW, and/or DHS may occur concurrently with MetaStar concurrent reviews.
- 8. IRIS Consultant Agencies have assigned DHS/NOA SharePoint sites and for which DHS, ICAs, and MetaStar engage in tracking NOAs/appeals and exchanging information regarding the appeals process.

#### **Notice of Action**

Step #	Responsible Partner(s)	Detail
Step 1	ICA, DHS	ICAs complete the NOA any time there is a denial ( <u>F-01204A</u> ), limit ( <u>F-01204B</u> ), reduction ( <u>F-01204C</u> ), or termination ( <u>F-01204D</u> ) of IRIS services. DHS completes the NOA in situations in which a denial or limit of a requested good or service comes as a result of a Budget Amendment or One-Time Expense (BA/OTE) request.
Step 2	ICA	ICAs mail all NOAs, including those prepared by DHS, which include information regarding the process to file an appeal. The NOA is sent to the participant within ten (10) days of the decision.
Step 3	ICA	ICAs enter the NOA information into the DHS/NOA SharePoint site. Required fields include: "Status," "Participant's Name," "MCI," (Master Client Index) "County," "Target Group," "IRIS Consultant," "Area Lead," "Date NOA Sent," "Type of NOA Sent," "Source of NOA", "BA/OTE Reference #," "Subject of NOA," "Specific Good/Service," "NOA Detail," "Reason(s) for NOA," and "NOA Issued By." DHS is responsible for completing these fields for all NOAs pertaining to BA/OTE.
Step 4	Participant	Participants determine whether they will file an appeal and are responsible to submit the required paperwork within 45 days to the DHA. Participants also determine whether to request a continuation of service(s) at this time.

# Notification of Appeal

Step 5	DHA	DHA sends notification to the DHS of their acceptance of the participant's request for appeal.
Step 6	DHS	DHS forwards the DHA notifications to the ICA and to MetaStar.
Step 7	ICA	ICAs enter the hearing information into the DHS/NOA SharePoint Site completing the following fields: "Appeal Received" and "Date Appeal Filed."

### **Concurrent Review**

Step 8	MetaStar	MetaStar initiates the concurrent review process by checking the "Appeal Received/Concurrent Review" option in the "Status" field and completing the "Date Concurrent Review Opened" field in the DHS/NOA SharePoint site. MetaStar will assign a staff person for review.
Step 9	MetaStar	MetaStar notifies the participant, in writing, of his/her option to participate in the concurrent review process. MetaStar attaches concurrent review notification letters to the NOA record in the DHS/NOA SharePoint site.
Step 10	Participant	The IRIS participant determines whether he/she will participate in the concurrent review process.
Step 11	MetaStar, Participant	MetaStar collects information from the participant pertinent to the appeal for participants that elect to have the concurrent review.



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Step 12	MetaStar, ICA, DHS	MetaStar engages with the participant's ICA and when appropriate, DHS, in an effort to reach a mutually acceptable agreement with the participant. All parties document all contacts in the "Communication Log" in the DHS/NOA SharePoint site.
Step 13	MetaStar	Upon completion of the concurrent review, MetaStar completes the "Concurrent Review Outcome" and "Concurrent Review Closed" fields in the DHS/NOA SharePoint site. MetaStar sends a closure letter to the participant and attaches the letter in the DHS/NOA SharePoint site. In cases for which the appeal was resolved during the concurrent review, MetaStar shares information with the IRIS participant regarding the process to notify DHA of his/her intent to withdraw the appeal.
Step 14	Participant	If MetaStar was able to assist the IRIS participant in resolving his/her case without a hearing, then the IRIS participant submits the "Voluntary Withdrawal" form to withdraw his/her request for hearing to DHA.
Step 15	DHA, DHS	DHA sends DHS formal notification of a dismissal reflecting the IRIS participant's withdrawal of his/her request for a hearing. DHS forwards the information to the participant's ICA and MetaStar.
Step 16	ICA	The ICA enters "Withdrawn" as the status in the DHS/NOA SharePoint site, completes the "Was Appeal Withdrawn" field, and enters the appropriate date in the "Date Withdrawal Accepted by DHA" field. The ICA then makes the appropriate notations in the "Pre-hearing Resolutions" field.
Step 17	Participant, DHA, ICA	If MetaStar was unable to assist the IRIS participant in resolving their need for an appeal, DHA conducts the hearing as scheduled and the participant's ICA represents the IRIS program.
DHS and	ICA Negotiati	ons
Step 18	Participant	The participant decides whether to work directly with their IRIS Consultant Agency or with the DHS to come to a mutually agreeable solution and avoid the need for a DHA hearing.
Step 19	ICA and/or DHS	If the ICA and/or DHS assist the participant in negotiating solutions or providing clarification regarding the contents of NOAs, independent of MetaStar's concurrent review, then the ICA and DHS check the status "Negotiations – ICA" and/or "Negotiations – DHS" respectively in the DHS/NOA SharePoint site to indicate to MetaStar their involvement in the process. ICAs and DHS document all contacts in the "Communication Log" in the DHS/NOA SharePoint site.
Step 20	Participant, DHS, ICA	The participant sends written notification to DHA of his/her intent to withdraw the request for appeal using the "Voluntary Withdrawal" form, upon negotiation of an acceptable resolution. The ICA can provide and assist the participant with the needed "Voluntary Withdrawal" form to submit to DHA to withdraw his/her application.
Step 21	DHA, DHS	DHA sends DHS formal notification of the participant's withdrawn request for a hearing. DHS forwards the information to the ICA and MetaStar.



Step 22

**ICA** 

Resolutions" field.

The ICA enters "Withdrawn" as the status in the DHS/NOA SharePoint site, completes the "Was Appeal Withdrawn" field, and enters the appropriate date in the "Date Withdrawal"

Accepted by DHA" field. The ICA then makes the appropriate notations in the "Pre-hearing"

**Hearing Process** 

Step 23	DHA, DHS	DHA sends notification of the hearing date to the participant and DHS. DHS forwards all DHA communications to the ICA and MetaStar.
Step 24	ICA	The ICA completes the following fields in the DHS/Notice of Action SharePoint site: "Date Appeal Filed," "Continuation of Services Requested," "Continuation of Services Ordered by DHA," "Date ICA Received Hearing Notice," "Hearing Date," and "Staff Notified of Hearing Date."
Step 25	ICA	The ICA prepares a Summary of Action (SOA) and provides the SOA to DHA. The ICA completes the "Date SOA Sent to DHA" field in the DHS/Notice of Action SharePoint site.
Step 26	DHA, Participant, ICA	An Administrative Law Judge (ALJ) from DHA facilitates the fair hearing. The participant, and the ICA representing the IRIS program, provide evidence in support of their respective positions.
Step 27	ICA	The ICA completes the "Hearing Record Left Open" field in the DHS/NOA SharePoint site after the hearing.
Step 28	ALJ	The ALJ renders a decision on the appeal and provides written notice to DHS. DHS forwards the decision to the ICA.

# **Post-Hearing Activities**

Step 29	ICA	If there is an initial hearing decision, then the ICA completes the following fields in the DHS/NOA SharePoint site: "Initial Hearing Decision" and "Initial Hearing Decision Date." Subsequently, the ICA provides the ALJ with a written response to the proposed decision.
Step 30	ICA	If the ALJ renders a final decision, then the participant's ICA then completes the following fields in the DHS/NOA SharePoint site: "Final Hearing Decision" and "Final Hearing Decision Date." In cases where the ALJ mandates a new or updated Individual Support and Service Plan (ISSP), the ICA submits a plan restoring the disputed service(s) and completes the "New ISSP Needed" and "ISSP Update Sent" fields in the DHS/NOA SharePoint site. In cases where a revision to the Long Term Care Functional Screen (LTC FS) is required, the ICA completes the revision to the LTC FS and the "Date of LTCFS Revision" field in the DHS/NOA SharePoint site.
Step 31	ICA	Upon completion of all Administrative Actions, the ICA sends written notification to DHA of the completion of these tasks and completes the "Date of Certificate of Administrative Action" field in the DHS/NOA SharePoint site. The ICA then changes the status to "Closed."

# **Appeals Process**

Step 32	Participant	If the ALJ's decision aligns with the decision of the IRIS program, then the participant decides whether to file for a re-hearing.
Step 33	ICA	The ICA continues to represent the IRIS program in re-hearings. The ICA captures these activities in the following fields in the DHS/NOA SharePoint site: "Re-hearing," "Date of Re-hearing," and "Re-hearing Decision." If the re-hearing decision aligns with the participant's desired outcome, then the ICA utilizes the preceding fields related to LTC FS revisions, plan updates, and certificates of administrative action as appropriate.



# **Monitoring Process**

Step 34	DHS	DHS monitors the DHS/NOA SharePoint site to ensure that the ICA and MetaStar correctly enter information into the system and follow the process outlined in these work instructions.
Step 35	DHS	DHS provides directives regarding any required action in the "Communication Log" field of the DHS/NOA SharePoint site.
Step 36	ICA, MetaStar	The ICA and/or MetaStar complete all directives given by DHS in the "Communication Log" field of the DHS/NOA SharePoint site.

### **Data and Ouality Management Process**

Data and Quanty Franagement 1 100039			
Step 37	DHS	DHS extracts data from the DHS/NOA SharePoint site on a monthly basis as per the document, "Notice of Action Monthly Data Requirements."	
Step 38	ICA	The DHS/Quality Lead and the ICA Quality Manager meet monthly and review the NOA data. If the data indicates poor performance, then DHS requires the development and implementation of a Quality Improvement Project. The ICAs complete all Quality Improvement Projects as per IRIS Policy Manual Section 10.4 and in accordance with any further direction by DHS.	

